

St. Luke's NEWS



January 1941

Volume 2 Number 1

The Greater St. Luke's



(This is the third of a series of articles on St. Luke's program of development which was announced last fall. Each article deals with a particular phase of the program.)

NO HOSPITAL can long retain leadership if it merely maintains itself at yesterday's level. What institution today, for example, would be satisfied with the X-ray equipment that was considered modern in 1930; with nurses who had been graduated in 1930 and had done nothing to keep abreast of the changes since; or with physicians who are still treating pneumonia as it was treated a decade ago? Not St. Luke's, certainly.

"Science," said Isaiah Bowman, President of Johns Hopkins University, "recognizes no terminal points in investigation. Each advance furnishes a springboard from which to make a further leap forward."

St. Luke's has lived because it has been equal to the challenge to meet rising standards and to provide wider services. It has recognized no terminal points in investigation or service. Non-sectarian and independent, St. Luke's never has been and never could be concerned with the race, creed or color of the sick who come to its doors.

In the seventy-six years since it was founded, St. Luke's has grown in size from seven to 435 beds, and in service from forty-one patients in 1864 to 12,100 patients admitted in 1939. This composite record of age, size, and service is not excelled by any general hospital in Chicago not under public control nor operated for profit.

It is important to a clear understanding of St. Luke's accomplishments,

its problems, and its aims to keep in mind that it is a voluntary general teaching hospital.

Hospitals not under public control are in three classifications:

- (1) Non-teaching hospitals that are operated solely for profit.
- (2) Non-teaching, non-profit hospitals that serve pay patients, some who pay in part, and some unable to pay anything.
- (3) Non-profit hospitals that serve pay patients, part pay patients, and those unable to pay, and which also teach.

The purposes of hospitals in the third classification being broader than those in the first two, likewise their obligations and their needs are greater.

No institution worthy of the name of a general hospital can exist upon its earned income alone. Still less can a voluntary general teaching hospital exist upon its earned income. The revenue received from full and part pay patients is far from sufficient to meet the expense of operating St. Luke's.

Until recent years, it has been customary for hospitals, for colleges and universities, for charitable societies and other eleemosynary institutions to accomplish major financing operations by means of capital "drives" for large sums of money.

A decade ago, little difficulty was encountered by such institutions in raising large sums of money. Deficits that had accumulated would be wiped out,



the money for buildings or endowment would be obtained, in the short period of an intensive campaign; usually as the result of the ability and the willingness of a few individuals to contribute a substantial sum of the total.

That was not sound financing. Institutions became dependent upon the support of those few people, and when that support was no longer available, it was not easily replaceable.

Few capital drives for large sums of money, except for relief purposes, have been successful in this country in the past decade. In Chicago, there is no record of successful building or endowment campaigns in the past ten years. They appear to be forever among things of the past. This being so, an intensive campaign within certain time limits is not the answer to St. Luke's needs. Yet St. Luke's needs must be met. If they cannot all be met today or tomorrow by means of an intensive campaign, they must be met this year, and the next, and the next, by sustained effort. But, the time to start meeting the Hospital's needs is *TODAY*.

The difference between an intensive campaign and St. Luke's sustained effort is a difference of degree, not of kind. The end purpose is the same, the methods to achieve the purpose are similar.

Large gifts must be sought. They are to be had for worthy purposes properly presented. In this community there are men and women who, made acquainted with St. Luke's needs in terms of enduring service to humanity, would recognize, and probably embrace, an opportunity to erect a living memorial—one of St. Luke's projects, or a unit of a project. The gift of steel and stone lives long after the giver passes; the good accomplished lives forever in the fuller lives of men and

women, their children, and their children's children. A gift to St. Luke's is not a gift of dollars, but of buildings and beds, scientific equipment and medical education, and all the instruments of healing which are translated into free medical service for some, better medical service for all, and preventive medical service for the entire community.

Sometimes it is necessary to obtain more than one gift to accomplish a large purpose. When it is necessary to seek ten gifts, ten gifts should be sought. When there is no one individual able to build a project, several individuals can always be found to build units. A great project may be beyond the means of a person who is able and willing to build a unit of that project. The newspapers frequently report large capital gifts to institutions for the purpose of building great memorials; frequently they report capital gifts for the erection of units of needed projects. Such capital gifts are essential to the success of St. Luke's program.

St. Luke's needs large capital gifts now, and every effort should be made to obtain them now. But the gift for today should not end the giving. The guiding thought in seeking large gifts for St. Luke's should be: a gift now and a bequest later. However, better only a bequest later than no gift at all. Hardly a day passes that the newspapers do not report substantial bequests, frequently to hospitals. Of how many of these bequests has St. Luke's been beneficiary? If the Hospital has not received the proportion of these philanthropies which its service to the community merits, it appears self-evident that the story of St. Luke's needs and possibilities has not been told. Gifts in this form also are essential to the success of St. Luke's program.

(Continued on page 13)

Behind the Scenes at St. Luke's with Gus the Brace-Maker

A CRAFTSMAN of the old school is August Ficht, the orthopedic appliance maker of St. Luke's. Skilled in many kinds of work, he is well known to surgeons throughout Chicago. "Gus" has had 27 years of experience in his craft, having been with Sharp and Smith, one of Chicago's earliest makers of surgical appliances, before coming to St. Luke's ten years ago.

Mass production and monotonous modern processing are unknown to Gus, for every appliance he makes is a special job and no two are ever exactly alike.

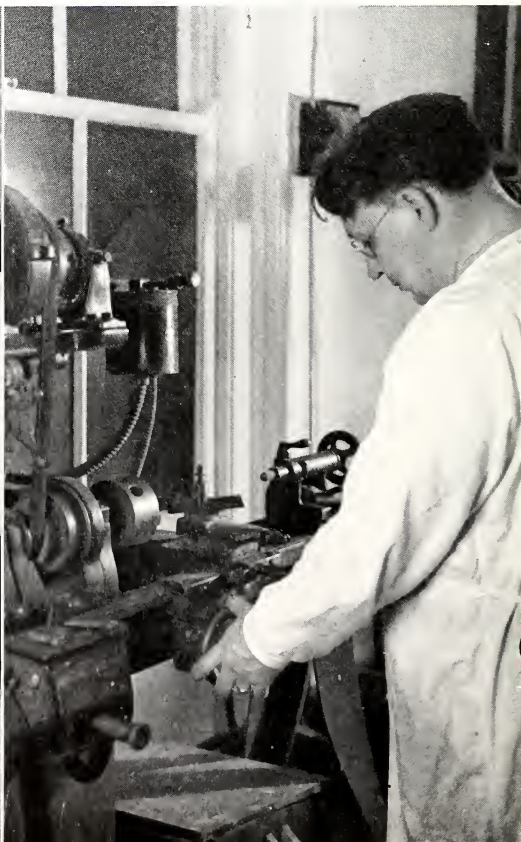
He works in iron, steel, brass, alloys, wood, leather, fabrics, paint, varnish, plaster of paris and other materials; using power lathes, drills, abrasive and polishing machines, forge, anvil and other mechanical devices. He turns from one to another with the nonchalance and confidence of one who has been intimate with his tools for a long time.

In addition to the work listed above, one of Gus' specialties is making cellulose acetate splints for any part of the body. In making one of these, a plaster cast form of the part of the body to be

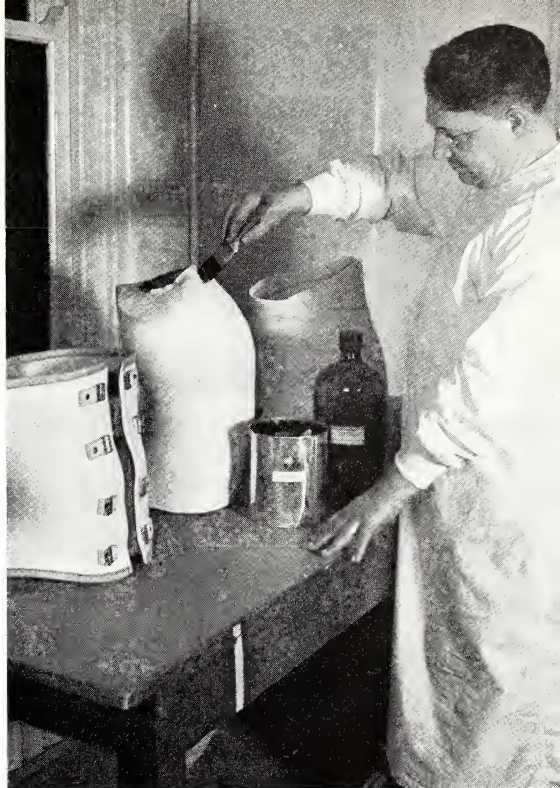
GUS WORKING AT THE ANVIL AND FORGE.



AT THE LATHE.



plinted is made. Stockingette is put on this cast and then eight to ten coats of cellulose acetate are applied by a paint brush onto the stockingette. While the cellulose acetate is still wet, a second coat of stockingette is applied and this continues until four layers of stockingette, with cellulose acetate on each layer, have been applied. The final coat has as many layers of acetate as necessary



MAKING A CELLULOSE ACETATE SPLINT.



A FINISHED CELLULOSE ACETATE SPLINT.

CRAFT WORK IN LEATHER IS ALSO IMPORTANT.

for a smooth and glossy surface and the inside is also finished smoothly. Straps and buckles are then applied to the splint to hold it in place on the patient. The finished splint is light in weight, waterproof and very comfortable.

Gus feels that his chief difficulty today is finding someone with versatile training. There are many men trained to do one type of work, but not the many varieties which his duties require.



St. Luke's News Celebrates First Birthday

By CHARLES H. SCHWEPPE

President

This issue marks the first birthday of ST. LUKE'S NEWS. Just one year ago St. Luke's Hospital started on a new venture by publishing 3,000 copies of this monthly magazine and sending them to people inside and outside the Hospital whom we believed to be interested in our affairs in one way or another.

The reception accorded the first issue of the NEWS was highly gratifying, but much more gratifying has been the increasing interest in and demand for this magazine. This is a reflection of the deep interest which readers of the NEWS have for the Hospital itself.

The NEWS was designed to keep its readers currently informed about outstanding developments in connection with the Hospital—its service, facilities, staff, employes and its general welfare. How well it has fulfilled this purpose is shown by the fact that the Industrial Editors Association of Chicago recently awarded first prize to the NEWS among magazines entered in the industrial publications field.

All of us who are interested in the welfare of St. Luke's Hospital are grateful to those who have contributed time, thought, and energy toward making the NEWS an important factor in the Hospital's life.

The year 1940 was a significant one for St. Luke's. A few months after the NEWS was founded the Hospital inaugurated a program of development in which we now are actively engaged. There are increasing indications that

the program is going to be highly successful and in this success the NEWS has an important part.

We enter upon the new year grateful for all benefits which accrued to St. Luke's in the past year, and in the hope and determination that the Hospital's progress this year will be greater than in any year of the past.

By CHARLES A. WORDELL

Director

Happy Birthday to the NEWS and Happy New Year to its readers.

The NEWS was a new but an important factor in the Hospital's progress in 1940. Basing future expectations on past performances, all of us expect this monthly magazine to contribute mightily to St. Luke's progress in 1941.

As for the readers of the NEWS, those hundreds of devoted, earnest and hard-working friends of the Hospital—the Board of Trustees Medical Staff, the Woman's Board, the Women's Auxiliary, the employes and many others outside the Hospital—St. Luke's could not long endure without them, much less look toward greater service in the future, as it confidently does.

As all of you who read the NEWS know, St. Luke's Hospital has inaugurated a broad program of development. The program calls for certain new buildings and their equipment and for greater endowment. It has one purpose: more service and better service

(Continued on page 13)

The Telephone Switchboard the Pulse Beat of the Hospital

BY ELEANOR STAKE

Chief Operator

"DOCTOR BROWN, Doctor Smith" "Doctor Brown, Doctor Smith," and with those four summons, a little drama is often begun. The voice that sets this drama in motion becomes familiar to patients after their second or third day in the hospital. It becomes a greeting from an unknown but ever-present friend. Someone is always near, accessible, no matter what the time may be. Ceaseless in its service, that voice is the symbol of the hospital, "Doctor Brown, Doctor Smith" "Doctor Brown, Doctor Smith."

The patient who hears it knows, and knowing, trusts faithfully in the people about him, because the active hospital is knit together by the "voice." Listening to it, one hears it call for the doctor, the interne, the housekeeper, the Reverend, the dietician, all linked by a strong bond of service to the patient.

The switchboard is often referred to as being similar to the pulse beat. Rather from an abstract point of view, it is a mechanical adaptation of a heart with many arteries and veins, pouring life into an institution. It is the pulse of the entire organization.

A FLASH—an accident of some kind or another. The operator completes the connection, setting the routine preparations in motion, and by the time the unfortunate victims have arrived, efficient precision is ready to receive them. Yet the voice announcing the emergency call over the speaker remained cool, steady, dependable, symbolic of the coterie of attendants awaiting the patients.

To the operator, the flash on her board can become a challenge. Her task is vitally different from that of a switchboard operator in a business organization; service to the patient is the primary duty and responsibility, and a life may hinge upon her efficiency and promptness. Perhaps this difference explains the reason the girls remain so long in the service of a hospital. If asked why she is content to remain so long, she would answer that she does not know; she is simply fascinated by the activity about her. The work is never monotonous, there is always the anticipation of what is going to happen next?

Of course, a great deal of humor hides behind the flashes on the switchboard. The anxious father-to-be soon makes the presence of Mrs. Mother-to-be an item of more than ordinary interest to the operator, while she serenely completes the frenzied call. His voice becomes familiar, and reveals the gamut of emotions, for the operator gradually becomes attuned to the rhythm of voices. The confession that many of these unseen transient friends are really missed when their voices no longer come over the wires may surprise the outsider. Also, the admission that the operator often wishes she could learn the outcome of some of the patients may seem strange, but have you ever started a continued story and missed the last chapter?

St. Luke's switchboard is a four-position dial, with 375 working ter-

(Continued on page 10)

GRACE EPISCOPAL CHURCH

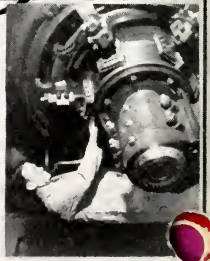
INDIANA AVENUE

STICKNEY BUILDING
(1898)

OLD
BUILDING
(1882)



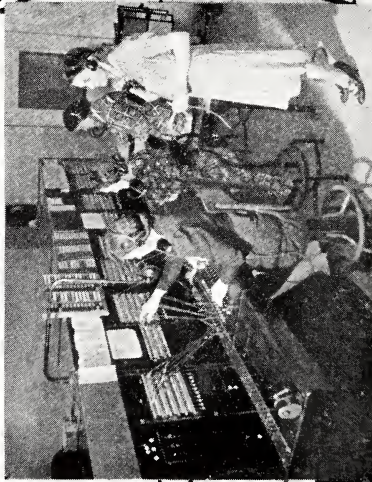
BOILER ROOM (1925)



OLD BUILDING



OLD
BUILDING
(1882)



KIRKWOOD
BUILDING
(1915)



MAIN BUILDING
(1925)



OLD BOILER ROOM

PROPERTY

LINE →

SMITH MEMORIAL BUILDING (1907)

SARANAC BUILDING
(1892)

MICHIGAN AVENUE



THIS CAN ONLY HINT AT THE COMPLEXITY OF THE TELEPHONE SYSTEM



The Telephone Switchboard

(Continued from page 7)

minals and twenty-six trunk lines. It has a three line key cabinet in the lobby of the Indiana Building, which is the "Doctors' Registry." Manned by Miss Anna Spence, all calls for the doctors are handled through these lines, the source of the paging system, and it takes

quite a load off the switchboard. There are eight operators on the switchboard, who work on schedule. They are Eleanor Stake, Chief Operator; Marion Clifford; Loretta Graffy; Mae Bruen; Rose Sargant; Anne Cullen; Dorothy Gisser; Liberty Moore; and for vacations and sick relief, Virginia Cahill.

This is the capable staff that handles your calls at St. Luke's and we have completed another peek behind the scenes at the Hospital.

A Step in the Path of Progress

BY CHARLES A. WORDELL

Director

MODERATE price hospital rooms done in moderne were a news item, two years ago, when St. Luke's Hospital had its formal opening of twenty-two rooms, the entire Seventeenth Floor of Main Building.

The high rate of occupancy of these rooms indicated their popularity during the first twelve months and gave evidence that if the demand was to be satisfied, additional accommodations of this class would have to be provided.

The management concentrated attention on additional accommodations comparable to these. After two and one-half months of remodeling we now announce the formal opening of the entire Sixteenth Floor of the Main Building of twenty-one rooms, which will be used exclusively for the care of female patients. The Seventeenth Floor will be used for male patients.

The rooms are decorated with a carefully worked out color scheme designed to promote cheerfulness and home-like surroundings. All furniture is in keep-

ing with the color scheme. Appropriate treatment is also given to corridors. The ceiling of the entire floor is of sound-proof material.

The windows of these two floors frame a magnificent picture of Chicago and its Lake Front.

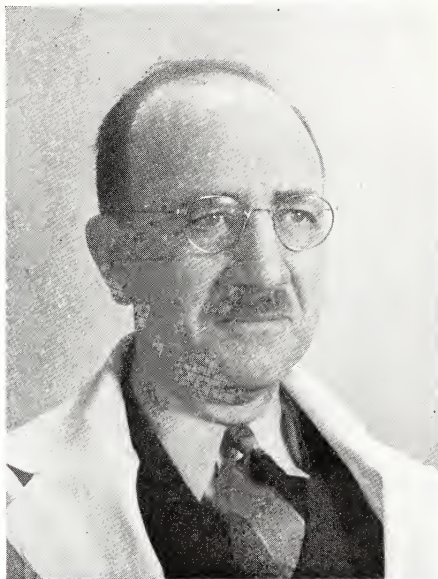
The completion of this private section is another accomplishment by the management of the hospital in their program to keep St. Luke's up to date in every respect.

To this end they are devoting a great deal of attention to planning and research to provide more comfortable accommodations, more modern equipment essential to diagnostic work, and more effective treatment for persons of moderate means. St. Luke's is not content to stand on the record of what it has accomplished. There is much that needs to be done and that St. Luke's wants to do and plans to do in its natural field of service. To do them, the hospital is preparing itself for tomorrow.



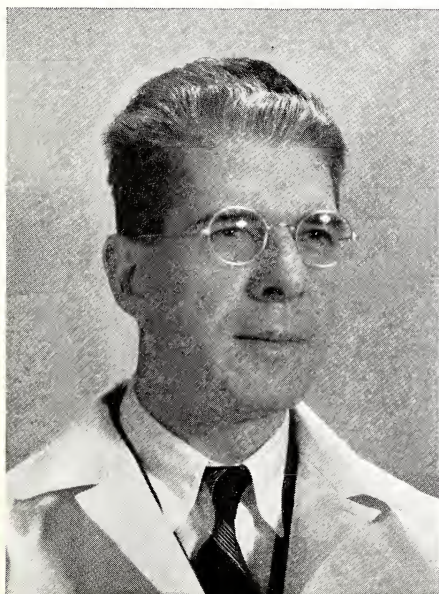


DR. SELIM W. MCARTHUR, PRESIDENT



DR. GEORGE K. FENN, SECRETARY

Presenting the Officers of St. Luke's Medical Staff



DR. WILL F. LYON, VICE-PRESIDENT



DR. EUGENE A. EDWARDS, TREASURER

Around the Hospital

St. Luke's News

*Devoted to the welfare of
St. Luke's Hospital*

Information for the friends of the Hospital
regarding its service, personnel, affairs,
accomplishments, and aspirations.

Published each month by St. Luke's Hospital
1439 South Michigan Avenue
Chicago, Illinois

Editor MARION B. PIERCE

ADVISORY COMMITTEE

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cal Staff*
CHARLES A. WORDELL, *Director*

Vol. 1 JANUARY, 1941 No. 1

Enclosed with this issue of ST. LUKE'S NEWS is a post card requesting your comments and suggestions on the magazine.

Publishers of national magazines are able to check their reader interest by the rise and fall of paid circulation. With a publication such as ours, which is distributed free, we have no such barometer, and must use a card such as the enclosed for this purpose. We hope that you will take this opportunity to tell us frankly how you feel about the NEWS and the material it features and whether or not you enjoy receiving your copy each month.

Naturally, we are anxious to receive these cards—please mail them promptly.

Spreading Christmas cheer, a chorus of forty boys and girls from the Morrill High School for Crippled Children during the holidays sang for some of the patients in St. Luke's Hospital.

The singers first visited three wards for adults and then went to the Children's Ward. After they had sung to the children, the Hospital was host at an ice cream party.

★

The Library acknowledges the following acquisitions:

Holmes, Rickettsian Diseases (MacMillan 1940): Library fund
Surgeon-General's INDEX CATALOGUE vol. 5: Hospital

Cooperation is also requested from each department in submitting one representative textbook pertaining to said division of medicine or surgery.

★

Miss Neva Summers, of the Graduate Nursing Staff of St. Luke's Hospital, has received orders from the United States War Department to report for nursing service at Fort McClellan, Aniston, Ala. Miss Summers, who volunteered her services, left Chicago January 5th.

In 1934 Miss Summers, whose home was in Sioux Falls, S. D., enrolled in the St. Luke's Hospital School of Nursing. She was graduated in 1937. Since her graduation Miss Summers has been a member of the Graduate Nursing Staff of St. Luke's Hospital, serving for a time as Assistant Night Supervisor, and more recently in supervisory and educational work as a Head Nurse.



NEVA SUMMERS

Three years ago Miss Summers volunteered as a Red Cross nurse subject to call in time of disaster. The War Department recently asked certain nurses if they would care to volunteer for a minimum of one year's service as Army Reserve Nurses. Miss Summers was one of the first to volunteer. She is twenty-six years of age.

Birthday Greetings

(Continued from page 6)

to this community, especially to those who are unable to pay for hospital facilities.

The NEWS must perform a vital part in this program by keeping St. Luke's friends fully informed about the Hospital, its service, its needs, and its development.

As Director of the Hospital, I have been able to see, probably better than others, the tremendous amount of work

and the splendid cooperation which have made ST. LUKE'S NEWS a prize-winning magazine as evidenced by the certificate on the back cover of this month's issue. We are grateful to all who have contributed to this end, and we earnestly hope for a continuance of their efforts in 1941.

Heartened by our progress in the past year, St. Luke's is confident that the new year will see us move rapidly toward our goal of the Greater St. Luke's.

The Greater St. Luke's

(Continued from page 3)

Equally important are the gifts of those who cannot afford to build units of projects. The needs and possibilities of St. Luke's should be brought to the attention of every potential giver, large and small. No road that may lead to the accomplishment of the Hospital's purpose should be left unexplored. The annual contribution has an important place in St. Luke's program; so, also, has the occasional contribution. A group of persons contributing \$25,000 annually would pay the cost of operating the Children's Ward at St. Luke's for six months; or of caring for 500 free ward patients a year for the usual time of hospitalization; or of educating fifty nurses for one year.

The small gift is important not only in itself but because, collectively, it is a tremendous force for the accomplishment of good.

Repetition of any act creates habit grooves. Once the habit of giving to a deserving institution has been developed, the person so accustomed is more than likely to remember that institution when he prepares for the day that will mark the end of his need for worldly goods.



MIDNIGHT CHAPEL SERVICES AT GRACE EPISCOPAL CHURCH.

How Christmas Came to St. Luke's

EMPLOYEES' CHRISTMAS PARTY AND THE POPULAR REFRESHMENT TABLE.



BELOW, THE DISPLAY OF CHRISTMAS GIFTS IN THE SHOP.



ONE OF THE PATIENTS IN THE SMITH BUILDING HAD THIS LARGE CHRISTMAS TREE AND DISTRIBUTED GIFTS AMONG HIS MANY FRIENDS IN THE HOSPITAL.

NEGRO EMPLOYEES RECEIVED CHRISTMAS BASKETS OF FOOD, FRUIT AND CANDY.



The Industrial Editors Association
of Chicago

PRESENTS

This Certificate

AS THE *First* AWARD

to

St. Luke's News
a Publication of the

St. Luke's Hospital

**IN RECOGNITION OF THE OUTSTANDING MERIT OF THIS PUBLICATION
IN THE INDUSTRIAL PUBLICATIONS FIELD**

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CONTEST CONDUCTED AMONG MEMBERS OF THE INDUSTRIAL EDITORS ASSOCIATION OF CHICAGO-1940

CERTIFICATE OF AWARD RECEIVED BY ST. LUKE'S NEWS FOR FIRST PRIZE IN ITS CLASS IN
THE ANNUAL CONTEST OF THE INDUSTRIAL EDITORS' ASSOCIATION.

St. Luke's NEWS



February 1941

Volume 2 Number 2

The Greater St. Luke's

(This is the fourth of a series of articles on St. Luke's program of development which was announced last fall. Each article deals with a particular phase of the program.)

MANY persons in Chicago believe St. Luke's is "a rich man's hospital." Friends of the Hospital should help to correct this belief. St. Luke's wants to serve all who come to its doors. It is especially anxious to broaden its service among the sick poor.

"Voluntary hospitals," said Dr. Selim W. McArthur, President of St. Luke's Medical Staff, "are founded by private donations, organized and run not for profit, but in most instances specifically run to care for the sick poor to the limit of their financial ability."

Several factors have developed to decrease the amount of such service in relation to voluntary hospitals' entire field of operations. Rapid advancement of medical science, with attendant improvement in technical procedures and equipment, has caused voluntary hospitals to devote an increasing proportion of their facilities to those able to pay.

St. Luke's is no exception to the rule. The Hospital's financial ability and its physical equipment for free service have not kept pace with its increased opportunities to care for the sick poor to the extent that is desirable from the standpoint of service to the community and of providing a wide range of experience for the Staff.

St. Luke's is doing as much free service as it can do under present circumstances. But St. Luke's, for the sake of the public and for the sake of its Staff, wants to do far more.

The Out-Patient Department is the poor man's family doctor. In 1939

there were 58,498 Clinic visits, of which 3,113 were new patients. These figures alone never can tell the story of bodies healed and lives saved, nor is it possible to place a dollar value on this service to the sick poor and its benefits to the Staff.

The Woman's Board finances the expenses of the Social Service and Out-Patient Departments. Doctors donate their time, and the Hospital supplies the necessary quarters. These quarters, improvised, are largely in Kirkwood Building, which is between Main and Smith Memorial. The supporting groups have done all it has been possible to do with the money and equipment available.

St. Luke's wants to keep its enviable position as a great voluntary teaching hospital. It must keep this position if it is not to become just another hospital to which the sick go for fair average treatment.

If St. Luke's is to maintain its high educational standard, the Hospital's free work clearly needs to be extended to a point that will afford the essential facilities for medical education and investigation. The first requirement for such extension is a new Out-Patient Building.

The proposed building should have a great increase in area and utility if we are to care adequately for the now badly crowded Out-Patient services, and enable the Out-Patient Department to act as family doctor to the number of sick poor that St. Luke's should serve and wishes to serve.

(Continued on page 11)

The Chaplain of St. Luke's

(The Altar of St. Luke's Chapel is Shown on the Front Cover)

FOR the past ten years, Reverend William Turton Travis has been the Rector of Grace Episcopal Church and the Chaplain of St. Luke's Hospital. As such, he is often consulted on banking and finance, law and wills, education of children, what to read and many other things, in addition to personal and domestic matters. He has become a depository for the joys and griefs, happiness and sorrows, safekeeping of personal possession, and a wealth of information and knowledge.

When Rev. Travis came to St. Luke's, he set out to learn about and take a practical interest in the administrative policy and ideals of the Hospital. He made a special study to understand the needs, problems and points of view of the patients. The Chaplaincy in a great hospital is a specialized type of ministerial work and he is a co-worker with those who serve and are served.

His work centers in and radiates from Grace Church, St. Luke's Chapel, which is directly connected with the first and second floors of the Main Building. Aside from service hours, the Chapel is a sanctuary of rest, meditation and devotions and is constantly used. Patients, relatives and friends; members of the nursing staff and others avail themselves of the privilege of a few quiet moments of meditation and prayer.

Visits of the Chaplain are by no means restricted to members of the Episcopal Church. While he expects to be advised when members of his own Church are admitted as patients, he welcomes an opportunity to be of assistance to all others, regardless of race creed or color. There is no barrier when the services of the Chaplain are

needed and he can be of any help.

It is not possible for Rev. Travis to plan much of the day ahead of time, because he must be subject to special or emergency calls at any time of the day or night. It is difficult to even describe a typical day, no two are ever alike.

Yet there is always a certain amount of routine, with definite hours for certain things, such as hours of service, appointments and so forth. The day may commence with Holy Communion in Chapel at 6:20 in the morning, followed by private Communions in the Hospital. There are general rounds in the Hospital nearly every day and many thousands of routine visits each year. The

VISITING THROUGHOUT THE HOSPITAL



Chaplain makes it a point to consider each visit a personal call.

Rev. Travis is the Chaplain and Pastor of the student body and is always available for consultations and interviews. Having two daughters of his own, he feels a special interest and appreciation in the problems of the young women in the school.

Various services are scheduled throughout the week as well as the well-attended general assembly, which features an address of special interest to students and nurses. Twice each year there is a special service for pre-clinical students, when they receive their uniforms and at the end of the pre-clinical period, there is the "Capping Service" which has been featured in the NEWS before. The "Going Out Service" is for the senior students at the completion of their training and is a gala event in their lives. The Chaplain officiates at all of these, and the Baccalaureate Service and the Graduation Service held each spring at St. James Church.

In addition to these special duties, Reverend Travis has the usual amount

of correspondence and desk work of the average pastor. He must prepare his sermons and addresses for the general assembly, and prepare classes for confirmation. There are the usual amount of outside meetings, conventions and committee meetings. He may have telephone calls or letters for patients communicating with their relatives or pastors. He may have a marriage; a Baptism or a funeral; and very frequently the early mornings are taken up with private communions for patients.

During the past ten years, Rev. Travis estimates that he has officiated at 1,331 services with an estimated attendance of 145,478 persons. He has performed sixty-three marriages, mostly of doctors and nurses and eighty-five Baptisms, many of them children of these doctors and nurses whom he married. Of the forty-nine persons he has confirmed, most of them have been from the nursing staff or the student body. It is no wonder that the Chaplain of St. Luke's is such an integral part of the institution, beloved by everyone.

THE CHAPLAIN WEARS A WHITE GOWN IN THE CHILDREN'S WARD



Some of the Essentials of Roentgen Therapy

By Dr. X

SHORTLY after the discovery of the x-rays by Professor Roentgen, many workers—most of them physicians—became interested in the therapeutic possibilities of the x-rays. Here in Chicago some of the original pioneer work was done by the late Dr. W. A. Pusey, Dr. Otto Schmidt, and Dr. E. Grube.

For years following Roentgen's discovery the methods of treatment and the determination of dosage were empirical, based entirely upon trial and effect. The equipment was rather crude and unstable, especially the x-ray tubes. It was necessary to season the old "gas" tubes and it was difficult to reproduce results due to variable factors. Dosage was computed in milliamperes-seconds or minutes. Voltage was determined by means of a point-spark gap. This was the method for many years after Professor Coolidge developed the hot-cathode x-ray tube which bears his name. The evolution of the Coolidge tube is probably surpassed in importance to the development of roentgenology only by the discovery of the x-rays. The early years of the 20th century saw coils and interrupters as the electrical sources for the production of x-rays. The use of coils and gas tubes required extremely long exposures, both for diagnostic and therapeutic purposes. Then Dr. Clyde Snook brought out the interrupterless transformer and another great forward step was accomplished. When used with the Coolidge tube the factors became constant and duplication of results possible.

The Snook and other modern power units were equipped with mechanical rectification which is still quite prevalent. The present day units use valve-tube rectification, doing away with noises and causing a minimum of radio interference.

Roentgen therapy is divided into four groups:

- | | | |
|---------------------------|------------|------------------|
| 1. Low voltage therapy | 50,000 to | 100,000 volts. |
| 2. Medium voltage therapy | 100,000 to | 140,000 volts. |
| 3. High voltage therapy | 140,000 to | 220,000 volts. |
| 4. Super voltage therapy | 400,000 to | 1,000,000 volts. |

Each group has its place in the treatment of disease. The therapeutic value of the x-rays depends on the amount of x-rays absorbed by the diseased area. With this in mind one can see that it is not so much the quality as the quantity of the rays. If the tumor is located deep in the body it is of utmost importance that sufficient voltage be administered to penetrate to the deeper structures. For instance, it would be very difficult to give a sufficient dose to a tumor located five inches under the skin with, say 100,000 volts. In treating deep seated lesions the higher voltages are of great advantage and necessity. It was in an effort to deliver larger doses to deep-seated tumors that high and super-voltage machines were developed. In treating a tumor located ten centimeters under the skin, not over 50% of the dose administered to the skin will reach the tumor. With this in mind, if it is necessary to deliver four doses to the tumor and only approximately 50% of each dose reaches the tumor, one can readily see that eight

areas or doses in all must be given to deliver 100 gram skin dose to the tumor. Depth dosage is measured by means of ionization chambers placed in cavities or by the use of plywood phantoms.

It is not necessary to use high voltages in the treatment of skin diseases. Usually the disease is not more than 3 to 5 mm. deep. It would be of very little value to have the greater part of the x-rays absorbed by the tissues below.

All tissues do not respond equally to x-rays. Some are responsive, others resistant. The near embryonic (young) respond more readily than older tissues. With this in mind it is quite easy to understand that the tissues of children are as a general rule more radio-responsive than adult tissues. The thymus of a child and testicular and ovarian tissues are very sensitive. The irradiation of the ovaries and testicles often leads to sterility. All these facts must be borne in mind when treating patients. The more highly differen-

tiated a tissue, such as bone, is, the more radio-resistant. Tumors in bones are usually very difficult to treat and require a large amount of irradiation in order to bring about improvement. The undifferentiated tumors as a general rule are radio-sensitive. They are likewise the most malignant. Radio-sensitivity does by no means infer that the tumor is radio-curable.

The application of the x-rays to the body causes marked changes in the blood. This observation has led to the use of x-rays in the treatment of blood diseases. It is known that cells in the blood react differently. Some, such as the lymphocytes, are sensitive, while others are more resistant. White cells are more sensitive than the red. A patient with leukemia has an overabundance of white blood cells. The judicious use of x-rays in myelogenous and lymphatic leukemia will often lead to a decrease in white cells and bring about a marked improvement in symp-



toms. As a general rule the lymphatic glands are x-ray sensitive and most enlargements due to disease can be decreased in size or made to disappear.

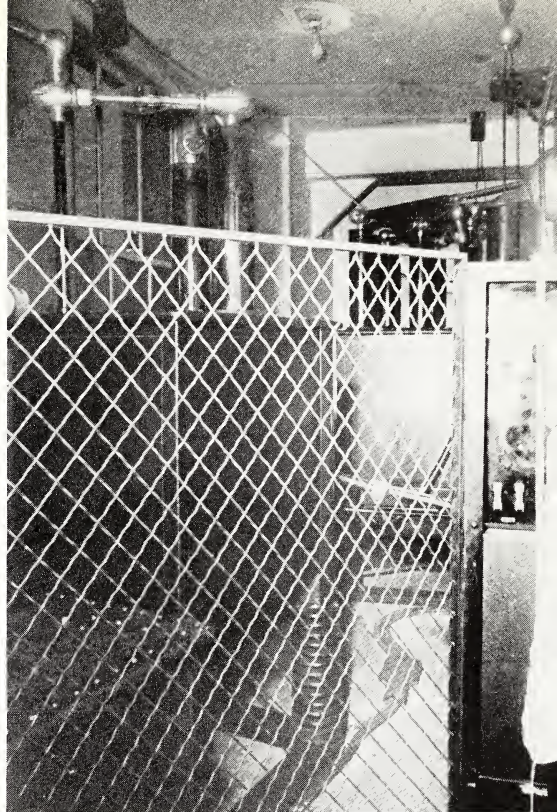
How do the x-rays affect tumors such as carcinomas and sarcomas?

1. By direct destruction of the malignant cells (necrosis).
2. By inhibition of the growth of malignant cells.
3. By causing changes in the blood vessels, thus decreasing the blood supply to the tumor. Without blood the cells fail to grow.
4. By causing changes in the tumor bed.
5. By possible liberation of a protective enzyme.

Most people are familiar with the use of x-rays in the treatment of tumors; such as carcinomas, fibroids, brain tumors, etc., and it is also known that glandular conditions and blood diseases often respond to irradiation.

The largest and most fertile field in x-ray treatment, the field in which the patient can usually be assured of a cure, is only known to a few. In recent years much work has been done to determine the value of irradiation in the treatment of inflammatory conditions such as erysipelas, bursitis, arthritis, cellulitis, boils, carbuncles, and many others. Most of the above diseases can be affected favorably by very small doses of x-rays. If treated early, it is not uncommon to have one treatment bring about complete restoration of movement and amelioration of symptoms—especially pain—. As a general rule these conditions have a lymphocytic infiltration and lymphocytes are very sensitive to x-rays. The improvement is usually prompt. If the condition is of long standing the response is not as prompt and it is necessary to give heavier doses over a longer period of time.

While x-rays are not a panacea and should be considered only as an adjunct to other forms of treatment, much help can be given properly selected patients.



TRANSFORMER ROOM, SUPER-VOLTAGE X-RAY
TREATMENT MACHINE

A word of warning in closing. The x-rays are a two-edged modality. While they are capable of doing much good when properly administered, they can also do irreparable harm in the hands of the unskilled. A dose of x-rays should be measured as accurately as any lethal drug. An occasional visit by some physicist to measure the quantity and quality of an x-ray beam is not sufficient protection for the patient. Each dose of x-rays should be measured in international R units by a properly trained and equipped physician. Just as the surgeon must be well trained to do an operation, so must the physician who expects to practice radiology be properly trained and equipped to do all the physical as well as medical examinations essential to the safe and adequate treatment of his patients.

Your Doctor's Hospital

BY A. P. MERRILL, M.D.

Assistant Director

UP FROM the ages has come the modern hospital. Struggling against great odds, against superstition and prejudice, the institution of today has attained its high goal of the most humanitarian of all enterprises. And stripped of all pretense, the hospital is resolved to do its part in maintaining a healthful and happier world by restoring to a useful life once more, those individuals which a world is now so intent upon maiming, crippling, and destroying.

In the United States today over six thousand hospitals are contributing every known scientific facility for the assistance of the physician in his treatment of certain phases of disease which afflict his patients. In addition there stands an army of one million trained persons, contributing to the success of this greatest of humanitarian endeavors. These hospitals represent a capital investment of four billion dollars annually, with a total payroll of three-quarters of a billion dollars, and next to our churches and schools, are the largest welfare activity in the continent.

About six out of every hundred persons are sick enough each year to require hospital care, making in the aggregate about seven million individuals annually, who are cared for in these institutions.

In your doctor's hospital it is necessary that the business management, the professional care, the departmental services, mechanical operation, the public relations, the personnel interests, and the administrative functions, all

be coordinated into a smoothly working whole. And it properly falls upon the management to insure the proper integration and understanding on the part of all concerned as to the fundamental policies of the institution and the part which each person is expected to play for the common good of the hospital, medical profession and general public.

Hospitals attempt to deliver the maximum of professional services at the least possible expense. Trustees and administrators are ever concerned with this perpetual problem, as medical science is becoming increasingly more complex, and the expense and costs of supplying these services to the patient are ever increasing. The modern hospital, in addition to its primary function of caring for the sick, is assuming an ever more important role in the field of preventive medicine. For this reason, a hospital is the radiating health center of every community, and co-operation with existing health and welfare organizations is important to the common end that every individual, young and old, regardless of race, creed or color, may be assured of that inherent God-given right, good health.

Economic, professional, and educational problems constantly confront the trustee and administrator. The economic side of hospital operation might be well illustrated by the accompanying photograph. This portrays, better than words can describe, the complexities of equipment necessary in caring for the very ill patient in the hospital of modern day medical practice. The hospital



AS DESCRIBED IN THE TEXT, THIS PICTURE SHOWS THE COMPLEX EQUIPMENT NECESSARY FOR THE HOSPITAL TREATMENT OF ONE CASE.

equipment required for the care of this patient with a fractured spine and severed spinal cord may be enumerated as follows: (1) air mattress, (2) overhead Balkan frame and pulleys, (3) fracture bed, (4) tracheotomy and suction outfit, (5) oxygen tank, regulator, humidifier and mask, (6) humidifier and vaporizer, (7) Munro bladder tidal drainage apparatus, (8) foot slings and supports, (9) traction head sling. All this in addition to the special nursing and extremely careful and expert medical care. The expense to an institution in supplying these services is terrific in amount. So much so that it is the exception if the hospital balance sheet at the end of a year does not show a deficit. But unlike most other types of business, the hospital does not close up at the end of the year because of

these deficits. These are usually absorbed by a group of kind-hearted people who believe in the good work of the hospital as a community asset and also that the trustees and people, who are operating the hospital, are doing the best job possible.

Professional problems in a hospital are ever present, because of the fine coordination necessary to focus all of the activities of the twenty or thirty hospital departments upon the patient, for his ultimate and speedy recovery. In fact, these relationships are so complex that a hospital, like a patient, has an inside which must be studied continuously, with the purpose of altering and discovering theory and practice best suited to the needs of the individual institution. Hospital management must continually restandardize procedures in

the light of modern medical science and business methods and apply them all to the work-a-day of the modern hospital. It must also make all personnel sufficiently familiar with them so as to insure competent performance.

The educational function of the hospital has developed to such an extent that it might well be compared with the university or college. Since medical education cannot be carried on without the aid of the hospital, the latter has always assumed an important place in the education of the physician. There is no other place where disease can be studied so well as at the bedside of the patient. The training of specialists requires several years training in a hospital, even after the young physician has graduated from medical school proper. These features of the hospital have become increasingly important because of the standards set down by the various American specialty boards of medical practice. In a similar way, the hospital is intimately concerned with the training of other hospital personnel such as nurses, dietitians, technicians. In fact, the hospital is the training ground for each specialized type of worker in the hospital, as there is no other place where such training can be obtained. National accrediting bodies and various specialty organizations have all instituted standards of training and experience which the hospital must meet if it is to fulfill this important educational function of its community service.

St. Luke's Hospital is a veritable community in itself, where 800 trained personnel are required in the care of the four hundred patients. The assembling of all varieties of disease cases under one roof introduces many complex problems in communicable disease control, sanitation, and safety. These sick patients must be in surroundings that are both comfortable and sanitary, and the hos-

pital must provide equipment necessary for the diagnosis and treatment of all these diseases. There must be plenty of sunshine and fresh air as well as well prepared food. Cleanliness and sanitation are essential if the institution is to exist. Because many of the facilities which the institution now possesses have outgrown their usefulness, the hospital is now engaged on its present program to obtain funds for new and improved facilities.

There is maintained over all hospitals a type of control for which the average individual has little knowledge. Through a system of licensing, local and state health departments are always cooperating with the hospitals in maintaining adequate standards of health and sanitation by means of inspections. Special licenses are issued for the operation of maternity and psychopathic departments, as well.

The American College of Surgeons, which comprises approximately twelve thousand leading surgeons in the United States and Canada, first inaugurated a movement in 1919 for the purpose of encouraging, assisting, and guiding hospitals in meeting certain definite requirements for the care of patients. At that time only 89 hospitals of over 100 beds or approximately 13% could measure up to these requirements. Today the improvement has been such that over 1800 hospitals of this size or 94% meet these standards. The death rate has been reduced more than half in approved hospitals during the past two decades and is a testimonial to the beneficial effects of these efforts.

The minimum standard, as proposed by the American College of Surgeons and which is used as a basis for the rating in hospitals, is concerned primarily with the quality of service rendered in the care of the patient. It specifies that the physicians and surgeons

who practice in approved hospitals meet the requirements of proper organization and selection; that they adequately study their cases and keep the necessary records of their findings; and finally, that the facilities of the hospital are of such character as to meet the best standards of medical practice today. Every hospital which is approved by the American College of Surgeons is granted a certificate to this effect.

The American Medical Association which comprises 110,000 of the 145,000 physicians in the United States is a powerful and influential organization working also for the best interest of the public in the matter of hospitals. Based on a criterion very similar to that used by the College of Surgeons, the American Medical Association, through its Council on Medical Education and Hospitals grades and classifies hospitals of 100 beds or over for eligibility for proper education and training of the intern, house officer and resident.

In this connection, it is of importance to note that the "Plan for Hospital Care" which is a non-profit community service organized by the hospitals of the Chicago area to help the people of the community meet the expense of hospitalization, specifies that only hospitals which meet the standards of and are approved by the American College of Surgeons and the American Medical Association are eligible to participate.

A third body striving to maintain hospital standards is the American Hospital Association. This plays an important part in doing all things which best promote hospital service and efficiency. Its official magazine serves to keep hospital administrators abreast of the best practices in hospital procedures in administration, and it is the professional organization of the administrators through which mutual advancement and progress is maintained.

The American College of Hospital Administrators is a fourth body playing an important accrediting role as regards hospitals. It maintains a high standard and certifies men of a superior ability and training who are qualified to administer the modern hospital.

No institution is compelled by law to adopt the principles advocated by these organizations. Acceptance of these standards is purely voluntary on the part of the hospital.

Yet the adoption of such standards to the fullest extent is the means by which an institution can rise to a high level of professional recognition.

The Greater St. Luke's

(Continued from page 2)

The probable location for the new Out-Patient Building is that part of Indiana Avenue north of Main Building now occupied by parts of Stickney House and Old St. Luke's. The estimated cost, \$350,000.

More free hospital beds, especially in the wards, also are needed if St. Luke's service to the poor is to be extended. To meet this need, it is proposed to remodel three floors in Main Building to provide ward service for 115 additional patients. The cost of remodeling these floors is estimated at \$60,000. The floors would become available as the proposed Nurses' Home, which was discussed in a previous article, is enlarged to accommodate the fifty probationers who now occupy them.

Obviously St. Luke's does not expect to complete its program of development in a few weeks or even in a few months. We are concerned with the Hospital's needs for this year and next year and ten years from now. It is equally obvious that by having a definite program our goal of The Greater St. Luke's will be more likely of attainment.

How the Children's Library at St. Luke's Is Growing

BY E. EVALYN G. McNALLY

Chairman, Library Committee, Women's Auxiliary

An Epilogue

ARE you sure this is the right time to leave, Mother?" Lonny was all excited. He was going back to the hospital to visit the doctors and nurses who had taken care of him for so many months.

"Yes, dear, they are expecting us," his mother looked proudly at the sturdy youngster walking beside her. For Lonny could walk again! Everybody, except Lonny, thought that the compound fracture of his leg would leave him crippled for life. But Lonny expected the hospital to work a miracle, and it had.

"Do you think they'll like the books I'm giving to the Children's Library," Lonny sounded anxious. He had carefully gone over all of the books in his own library picking out the ones he thought children in the hospital would enjoy.

"Of course they'll like the books. And I think you'll be surprised when you see the library now."

"Why, mother?"

"You won't be surprised if I tell you, will you? We'll be there in a few minutes and then you'll know."

After saying "hello" and visiting with several of the doctors and nurses Lonny knew, he asked for Miss Wood and learned that she was waiting for him in the children's library. After asking if it was all right to go, Lonny excused himself. With his package of books held tightly under his arm, he went toward the recreation room for boys and girls. When Lonny reached

the doorway he stopped in amazement.

"It is a real surprise, isn't it Lonny," Miss Wood smiled her welcome and came to the door where the young visitor stood, still speechless. "Do you like it?"

"Oh, Miss Wood, it's wonderful. And all of those new books on real open book-shelves." Lonny's eyes traveled each shelf of the three new open book-cases. Rows and rows of books—all sizes, all colors, all shapes. "Gee—I almost wish I was in the hospital again. I—I guess I shouldn't say that. But you know what I mean."

"Of course I do, Lonny. And I know how glad you are that boys and girls who come to the hospital will find these wonderful books."

"How many new books do you have, Miss Wood," Lonny suddenly remembered his letter to the doctor chief asking him if his friends and other friends of the hospital would send in any children's books they were no longer using.

"In less than three months we received more than one hundred and seventy books. We are indebted to you Lonny for many of them because it was your letter to the doctor chief that caused many people to send in their books."

"That's swell." Unconsciously Lonny squared his shoulders and stood taller than he had before. "Now I want to write another letter. And here are some books of mine for the children's library."

"Thank you, Lonny. You're a very generous boy." Miss Wood took the



THE GROWING CHILDREN'S LIBRARY

books and then brought paper and pencil before leaving the room just as she had many months before when he was in the hospital.

Some time later Miss Wood returned. Lonny was gone. She read the brief note addressed to her:

"Mother had to go and I couldn't wait to say good-bye. I am leaving the letter for the doctor chief. I was glad to see you again. I hope your library keeps on growing."

Then Miss Wood looked at the other letter.

"Dear Mr. Doctor Chief: I am all well because your hospital is so good. I came back today to say 'hello' and bring some books. Miss Wood showed me the new books and the new book-cases for the children's library. You have lots of good friends who want to help and do good things for your hospital. I want to help too. Some day I will bring more books. Love from Lonny." . . .

St. Luke's Hospital, too, has many

wonderful friends. In addition to generous gifts of all kinds some of them have already given scores of books to enlarge the children's library at St. Luke's. Since our request for books in the November issue of the ST. LUKE'S NEWS 201 children's books have been given to fill the shelves of the three new open book-cases, also a gift, shown in the "after" picture taken in January.

The nurses and the kindergarten teacher are delighted. Story-telling hours and reading periods are a joy when there are beautiful new books available. And the children are thrilled with the open bookshelves where those who are well enough may go and pick out books themselves.

There are approximately 450 books in the Children's Library now. Many of the old books are worn out and should be replaced with new ones. If you have any books that are no longer useful in your home, we shall be grateful if you will send them to us.

(Books for the St. Luke's Hospital Library for boys and girls should be sent to Mrs. Andrew McNally, Library Committee, Women's Auxiliary of St. Luke's Hospital, Receiving Room, St. Luke's Hospital, 1426 Indiana Avenue.—Editor's Note)

Around the Hospital

St. Luke's News

*Devoted to the welfare of
St. Luke's Hospital*

Information for the friends of the Hospital
regarding its service, personnel, affairs,
accomplishments, and aspirations.

Published each month by St. Luke's Hospital
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Editor MARION B. PIERCE

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Vol. 2 FEBRUARY, 1941 No. 2

Thirteen-year old Jeanette Jordan, colored, who has been bedridden in St. Luke's Hospital since May, 1940, received her grade-school diploma in a special graduation exercise at the Hospital, January 29.

Jeanette, whose home is at 5703 Lafayette Avenue, had her back broken

and was otherwise seriously injured in an automobile accident eight months ago. Nevertheless, she has continued her education at St. Luke's under Miss Ethel Bonfield of the Board of Education Bedside Teaching Service.

Jeannette says she hopes to be a secretary. Her hope was encouraged by William H. Johnson, Superintendent of Schools, who, in a letter to the little girl, wrote "If what you have done in the past is any indication of what you will do in the future, the coming years will most assuredly be successful ones."

Esther Mallory, another young patient in the hospital, received a double promotion from grade 5B to 6B at this time. The exercises were attended by representatives of the School Board and officials of the hospital.



At the annual meeting of the Board of Trustees, held on January 24, Charles H. Schweppe was again elected President of St. Luke's. Others re-elected were: A. Watson Armour, first vice-president; Joseph T. Ryerson, second vice-president; Chauncey B. Bor-

SPECIAL SCHOOL EXERCISES AT ST. LUKE'S, SEE ABOVE.





WOMEN'S AUXILIARY COMMITTEE

land, secretary; Walter B. Smith, assistant secretary; L. L. McArthur, Jr., treasurer and John C. Smith, assistant treasurer. The trustees devoted much of their discussion to the program of development discussed in the NEWS.

★

At the annual meeting of the Woman's Board, Mrs. John W. Gary was elected for her sixteenth term as President. Following the meeting, Mrs. Chauncey B. Borland gave a luncheon for her and the members of the Board in the nurses' quarters of the hospital. Other officers elected were: Mrs. Walter Wolf, first vice-president; Mrs. Huntington Henry, second vice president, and Mrs. John J. Mitchell, third vice-president. The treasurer is Mrs. Charles F. Glore and the assistant treasurer Mrs. W. Press Hodgkins. Mrs. Robert McCormick Adams is recording secretary, Mrs. Louis C. Sudler, corresponding secretary and Mrs. Watson McLallen is assistant corresponding secretary.

★

The picture above was snapped during a recent meeting of the Prize Committee for the St. Luke's Hospital Women's Auxiliary's annual Bridge party to be held February 24th in the

nurses' lounge. Preparations are in full swing—500 invitations have been mailed and prizes galore have been promised. Each year has shown a marked increase in attendance. All the proceeds are used for the benefit of the hospital.

Those in charge are: General chairman, Mrs. Arthur J. Coombs; Tickets, Mrs. Willis G. Diffenbaugh; Prizes, Mrs. Harold I. Meyer; Raffle, Mrs. George V. LeRoy; Dessert, Mrs. Percy J. Ross.

★

The Library acknowledges the following acquisitions from the Women's Auxiliary:

Bodansky, M. and Bodansky, O.: *Biochemistry of Disease*.

Ewing, J.: *Neoplastic Diseases*.

Cecil, R. L.: *Textbook of Medicine*.

★

The NEWS thanks its readers who were kind enough to return the cards enclosed in last issue.

★

At one of the largest services ever held in Grace Church, Louis Gdalan, assistant pharmacist in the hospital pharmacy, was married to Miss Kathryn Minor, a nurse at St. Luke's, during the month of January.



St. Luke's NEWS



March 1941

Volume 2 Number 3

What St. Luke's Needs

St. Luke's has a program of development but the question now is: How are these things to be accomplished?

For one thing St. Luke's needs capital gifts for buildings or units of buildings.

St. Luke's also needs substantial bequests for buildings or units of buildings and for more adequate endowment.

St. Luke's needs substantial annually contributed income.

These—capital gifts, bequests, and recurring gifts—all are essential for the accomplishment of St. Luke's program of development which follows in summary:

I	School of Nursing, including 425-bed Nurses' Home.....	\$1,125,000
	Unit I—Nurses' Home.....	\$450,000
	Unit II—Nurses' Education and Recreation Building	225,000
	Unit III—addition to Home.....	150,000
	Unit IV—addition to Home.....	300,000
II	Service Building 12 stories and basement.....	1,110,000
	Unit I—Administrative offices, medical services, residents' and internes' quarters, dining rooms, kitchens.....	750,000
	Unit II—addition to accommodate medical services	180,000
	Unit III—addition to accommodate additional internes	60,000
	Unit IV—addition for increased requirements of medical services.....	120,000
III	Out-Patient Building	350,000
IV	Remodel three floors of Main to accommodate eighty private patients, at \$25,000 per floor.....	75,000
V	Remodel three floors of Main to accommodate 115 patients, ward services	60,000
VI	Boiler and Engine Room Addition.....	150,000
	Needed for plant expansion and improvement.....	\$2,870,000
	Needed to bring endowment to total of \$5,000,000.....	3,764,636
	Total	\$6,634,636

The Greater St. Luke's

(This is the fifth of a series of articles on St. Luke's program of development which was announced last fall. Each article deals with a particular phase of the program.)

ST. LUKE'S plant efficiency leaves much to be desired. The administration is doing all that can be expected within the limits of equipment, but the equipment itself creates definite boundaries of accomplishment.

To some extent St. Luke's operates almost as two separate institutions. In addition to scattered housing facilities, service departments are duplicated, some administration offices are in Smith Memorial, others in Main Building. This causes some duplication of personnel. There is a correspondingly higher operating cost.

Part of the remedy for this situation lies in one of the steps in St. Luke's evolution: erection of a Service Building between Main and Smith Buildings, in four units as need develops. The estimated cost of the completed building of twelve stories and basement is \$1,110,000 divided as follows:

Unit I—administrative offices, medical services, residents' and internes' quarters, dining rooms, kitchens	\$750,000
Unit II—addition to accommodate medical services	180,000
Unit III—addition to accommodate additional internes	60,000
Unit IV—addition for increased requirements of medical services	120,000

The Service Building would eliminate duplications and increase efficiency, with an indicated lowering of operating costs; it would greatly improve accommodations in connection with the Hospital's educational program; it would facilitate development of that program. Specifically it would:

- (1) House centralized administrative offices.
- (2) Afford adequate kitchens and dining rooms.
- (3) Provide space for medical services now scattered through the two patients' buildings.
- (4) Give direct and easy connection between the six floors and basement of Smith Memorial and those of Main Building.
- (5) Provide living accommodations for fifty residents and internes whose present quarters are in Old St. Luke's which was built in 1882.

It has been said that a college teaches and a university learns. That is, a college imparts the sum of man's accumulated wisdom; a university adds to that sum by scientific investigation and by exploring beyond the boundaries of accumulated knowledge.

In the field of medicine, broadly speaking, St. Luke's is both college and university. While it teaches, it learns, and as it learns, it performs a great educational function. For it thus provides

(Continued on page 13)

The Record Room Is a Busy Place

LILLIAN H. ERICKSON

Medical Records Librarian

WHAT is the Medical Records Department? What service does it give? What is its value?

These questions are often asked, and it seems best to give the answer in a strictly candid, informal way. What is a day in our office like . . . what happens . . . who is there . . . what does the staff do?

Suppose it is Monday morning. With a neat plan in my head for getting some uninterrupted work done before the routine starts, I arrive an hour early. But before I have time to stow away my hat, the phone rings. An excited voice says "Please help me! I can have

a job at the factory if I bring my birth certificate to the Employment Office before noon. I need the job."

"Did you try at the Board of Health? They issue certified copies" (I can see my beautiful extra hour dissolving like a handful of fog).

"Yes, I tried, but they said it was not there, and anyway it would take several days to get it made. Please do help me."

"Give me your full name, the name of your mother, and the date of your birth, and then you may call in about an hour and a statement will be ready for you."

Downstairs into the vault I go, to

"A DAY OF SERVICE TO DOCTORS, PATIENTS AND MEDICAL RESEARCH."



turn the pages of the old registration books until the desired information is found.

It is eight-thirty by this time, and the history cards have arrived from the front office. Ninety-six patients have been admitted during the week-end, and many of them were previously hospitalized; some recently, others many years ago. Their past medical histories may be of great value in the diagnostic study and treatment of the present illness, so all former charts are sent to the wards for study by the attending physicians. Permanent admission file cards are made out for each patient, giving identification data and permanent filing number of the patient's charts.

While one girl takes care of these duties another checks the charts of the patients discharged. Today there are eighty-seven. After discharge each patient is represented in our office by a detailed record including history, physical findings, X-Ray and pathological data, surgery performed, treatment

given and nurses' notes. Each chart must be checked carefully and pages put in the proper sequence, and a quantitative appraisal of each record made. A daily census of the number of patients treated on each service must be prepared. A record of all maternity cases and babies admitted and discharged must be kept, to be compiled at the end of the month for city and state reports. My assistants and I settle back, each at her work. A few minutes pass when Dr. — enters. "I had a patient here about two years ago. I know her well, but her name has just slipped my mind. I would like her chart because her case was rather unusual and I have another similar case. Would you have any way of locating it?"

"Of course, doctor. What is the diagnosis? All our cases are cross-indexed according to diagnosis and surgery."

"Say, I've wondered about those files here. Tell me something about them.

A SURGICAL STENOGRAPHER AT WORK.



What do you keep there?"

"This, doctor, is our diagnostic file. Here we cross-index all diagnoses; primary, secondary and associated. We use the Standard Classified Nomenclature of Disease, published by the American Medical Association. This system of classification is at the same time topographical and etiological; that is, each disease is described and classified in terms of the tissue or organ where it is principally manifested, i.e. Tuberculosis may be found in several places as under lung, bone, kidney, etc.

"This is our operative file, where we cross-index all the surgery performed. Both of these files serve a useful purpose in facilitating clinical and statistical research. This third is our physicians' index, listing all patients treated by each doctor."

"Say, that's really something. I guess I will get busy on some research that I have wanted to do for some time."

Having explained to him the indices and furnished him with the desired information, we nod goodbye to a satisfied doctor, and we sit down again to the daily tasks.

Then the mail comes in. There are letters asking for verification of ages for the Old Age Pension Boards, letters asking for birth registrations, letters from insurance companies.

Through the door appears a figure, and before he speaks, I've guessed his mission—a subpoena to produce some record in court or before the Industrial Commission. I wish very hard that its a date may be tomorrow or the next day, but no—*today* at eleven. It is ten-thirty, and here is a job that can't be evaded and which I dare not put off. I hate to leave, the routine work for the morning is unfinished, and the jaunt to the court may mean the rest of the day spent down there. All my

plans for the day must of necessity be re-arranged.

Meanwhile, the telephones ring and ring. "When did the patient leave—" "Where did he go—" "What forwarding address did he leave—" "Who was his doctor—" and hundreds of others.

Time flies. We've promised to get out two hundred charts for a special research problem. This we do with sound satisfaction, realizing that the progress in medicine as recorded in textbooks and medical journals has come via the route of keeping accurate accounts of clinical and pathological data. The treatment of thousands of similar cases with results carefully recorded helps to guide others in the treatment of like cases.

Toward late afternoon the surgical stenographers return to report the work done for the day, and by their arrival we know that it is time to "close-up shop." A full day has passed—a day of service to doctors, patients, and medical research.

Some times we discuss our role in the hospital life, and as we enthusiastically review the program for a "Greater St. Luke's," we see in the future a centralized record department, equipped to keep in step with the demands of ever-changing medical science.

But not all of our hopes lie in the distant future, for in keeping with the progressive spirit of St. Luke's Hospital, the microfilming of medical records has recently been started. This method of preserving records has, almost since its birth, been recognized by the governments at home and abroad, as being the most economical and most efficient means yet devised. Therefore, it is not unusual that St. Luke's should adopt this modern measure in its medical records department.

Student Nurses Taught Good Citizenship During Past Year

THE St. Luke's School of Nursing not only educates its young women in the art of being good nurses, it develops their social consciousness and teaches them good citizenship. This is one of the objectives of the Co-operative Government Association, which was inaugurated in April, 1940, after a study had been made of the various types of student and faculty government in the Schools of Nursing and Women's Colleges of the United States.

The organization is governed by a Council, on which are members representing each of the various classes, and two faculty advisers. The Council is authorized to prepare rules and regula-

tions on all matters within the jurisdiction of the student association and submit them for the approval of the student body. Committees are set up to plan the recreation program of the school; to budget finances; and to see that the rules and regulations of the school are enforced.

Class meetings are held every month and suggestions are passed on to the School Council for consideration. In this way, each student feels that she is a part of this working democracy and takes a definite interest in the school and the government program. The Council meets every month, as does the rules and regulations committee, and

(Continued on page 14)

THE COOPERATIVE GOVERNMENT ASSOCIATION MEETS THREE TIMES A YEAR.



The Duties of the Personnel Department Have Grown with the Years

JAMES E. LEITCH

Personnel and Purchasing Dept.

SOME time back, when hundreds of steam barges, laden with lumber, plied between the small towns in Michigan and Chicago, we of the Personnel Department got our first job. Occasionally, as many as twenty of these steamships docked in our town for a cargo and in this contingency, sufficient of the unionized lumber-shovers, stevedores or long-shoremen were not available; hence, we of the dockwalloping or scab variety

EACH EMPLOYEE RECEIVES A PRE-EMPLOYMENT PHYSICAL EXAMINATION.



were reluctantly summoned by two long blasts of the whistle to get them loaded and on their way.

Old Captain Chris, with an accent like Yorgy Yorgenson, constituted the employment department, and the pay was fifty cents an hour;—smart money in those days, especially for highschool boys. Chris would “put the gleam on you” much in the manner of a fisherman pondering over an undersized trout; ask you if you could lift a ten inch plank and when you nodded, he would say—“Yump up on the pile and start shoven ’em down.” This meant that you were hired.

We cite the above in contrast to the procedure followed when a new member of St. Luke’s Personnel is under consideration. The following tabulation indicates to some extent what might be asked a prospective employee—modified or elaborated upon to suit the case in point:—

- Name, address and phone number
- Age, weight and height
- Education, married or single
- Length of time in Chicago
- Hospital or other experience
- How long since last employed
- Longest employment with one concern
- Restrictions as to residence
- Attitude regarding night work
- Known physical defects
- By whom referred

The reason for some of the above



MR. LEITCH MUST CONSIDER MANY THINGS IN INTERVIEWING APPLICANTS FOR EMPLOYMENT AT THE HOSPITAL.

questions is obvious, and, while others would seemingly have little bearing upon a decision to employ or reject, their pertinency has been often emphasized by what transpires later.

Residence in some localities makes them undesirable.

No phone service in some cases would prolong their employment beyond the time limit.

Education settles the question in many instances.

Family responsibilities shorten employment period of married women.

Travelers from eastern points to California; good till they earn their bus fare. (Like to renew their acquaintance on the way back—gunnin' for Horace Greeley.)

Hospital experience essential in many positions.

Long periods of unemployment, poor recommendation.

Split-shift positions necessitate living close by.

Twenty-four hour service demands shifting from day to night.

There is an old adage in the army regarding the physical unfitness of a soldier which emphasizes the fact that not only his services are lost but it sometimes takes two good men to carry him back. St. Luke's, therefore, with some four hundred and fifty sick patients to start with, must necessarily pay close attention to the condition of its personnel. The new employee is given a thorough physical examination; laboratory tests as well as X-Ray chest plates are made and all findings are referred to the Director's office before final approval for employment is given.

The new employee is now a member of the St. Luke's Family, which, including attending physicians, student nurses and internes, numbers over one

(Continued on page 14)

The Book Lady Is Known Throughout the Hospital

BY ELLEN C. HEDGES, LIBRARIAN

*Patients' and Nurses' Library,
Operated by Grace Episcopal Church*

(Another in the series of articles on behind the scenes at St. Luke's.)

"'Here is the 'Book Lady.''" The word travels down the corridor.

"How glad I am to be able to have a little time to read again, I never have at home," a patient has just told the librarian.

From a bed over in the corner of the ward, "Could you get me some books on chemistry? I studied it in High School and I should like to brush up on it."

From another bed, "Librarian, could I have a good mystery to make me forget this pain?"

And so on, along the ward or from room to room. Another patient would like something on poultry farming, he was always interested in the subject, but never had time to read about it until he came into the hospital. A railroad man wants something on engineering, another woman wants "something to pass the time away."

Few people realize that the Hospital Library (not to be confused with the Medical Library) is an indispensable factor in preserving hospital morale. This work has been maintained by Grace

"... ALONG THE WARD, OR FROM ROOM TO ROOM."



Episcopal Church and operated by a trained librarian for years, in St. Luke's. The importance of this work has been recognized in the recently coined term, "bibliotherapist." It is more than giving out books here and there, regardless of type or text, as most people think. Books distributed to patients must be therapeutic in value as well as constructive. A hospital librarian, or a bibliotherapist, is especially trained for this work.

Certain patients require certain types of books. The librarian consults the head nurse on each floor as to the patients' condition, physical and mental. She proceeds in this manner from floor to floor, patient to patient, and she must be careful of what she gives out. The wise librarian has few rules when dealing with patients, she lets common sense be the guide as to the number of books given to a patient, and the length of time they may be kept. She must learn about each patient, types of diseases, and be able to judge character. She must know about books, authors, plots, types of stories and whether or not a certain book is suitable for a certain patient. A cardiac patient cannot be given a book that is over-stimulating and exciting; a depressive cannot be given a morbid book. Yet it is important to note that the patient is not treated as a case or a disability, but as a human being.

Frequently, the book that the patient wants is too heavy to hold, or the print is too fine, or the story is too involved. The Librarian must tactfully suggest more suitable material. She also may encounter the patient who does not care to read, but just lies staring into space. While she does not press or urge them to read, she tries to find the cause of this lack of interest. It may be that the patients are illiterate, foreigners, or do not know that the service is free. The



"... STUDENT NURSES ARE HELPED TOO."

Librarian will talk to them and if they decide they wish to read, get them a book. To the illiterate goes a book of the alphabet and the simplest English, or a book with many prints and pictures. Gradually, as the patient grows more advanced in reading and thought, he asks for more books. The other alternative is the patient who continues the study of his particular line while convalescing.

Through the efforts of the Librarian, staff, student nurses and employes of the Hospital are helped in this manner too. Graduate nurses taking special courses at universities for their degrees find great assistance in securing needed material that would otherwise be quite expensive.

During the year 1940, 4,448 books were circulated to patients, 3,399 to Staff and employes, including the student nurses, and 1,212 to nurses taking post graduate work at Chicago and Northwestern Universities. This made a total of 9,059 for the year.

The work of the Library has proved to be of tremendous value as a Social Service. The Hospital is a solace to the sick, and an aid to the nurse, the physician and the employe.

Around the Hospital

St. Luke's News

*Devoted to the welfare of
St. Luke's Hospital*

Information for the friends of the Hospital
regarding its service, personnel, affairs,
accomplishments, and aspirations.

Published each month by St. Luke's Hospital
1439 South Michigan Avenue
Chicago, Illinois

Editor MARION B. PIERCE

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CHARLES A. WORDELL, *Director*

Vol. 2 MARCH, 1941 No. 3

The Library acknowledges the receipt of volume 14/3 of *The Medical Clinics of North America*, obtained through the Medical Library Exchange. Dr. Alfred Solomon has contributed two journals in his specialized field, *Psychosomatic Medicine* and *Psychoanalytic Review*. *Anatomical Record* and the newly published *Journal of Clinical Endocrinology* have also been received.

We thought some of our readers might be interested in a brief summary of the replies received from the reader interest cards we sent out with the January issue. Two weeks after the

magazine was delivered, 213 cards had been received.

The press run of the NEWS is 3,000 copies. Of these, 2,403 copies of the January issue were mailed, the balance were distributed around the institution. The majority of this latter group were to people who presumably were seeing the NEWS for the first time. Since 95 percent of the replies came from persons who regularly receive the magazine by mail, the following tabulation is based on replies in relation to the January mailing list of 2,403.

Replies received	213
(8.08 percent of mailing list)	
Replies signed	207
Read the NEWS	208
Discontinue it	5
Pass it along	131
Find it interesting	204
Too technical	1
Like its makeup	187

Of those who replied, 100 not only replied to the printed questions but made some comment. These comments covered a wide range of expression but their basic thought was favorable to the NEWS for which we are grateful.

Like a column in a certain daily newspaper, ST. LUKE'S NEWS depends upon its friends. Each of you are urged to help us in making this an interesting magazine, in contributing articles, features or news material. Any suggestions which you may have will be carefully considered. Please forward your material to the editor, either at the Hospital, or to Room 1615, Peoples Gas Building, Chicago, Illinois.



A CORNER OF THE NURSES' LOUNGE ON MAIN 12, SHOWING THE LARGE ATTENDANCE AT THE ANNUAL CARD PARTY OF THE WOMEN'S AUXILIARY OF THE MEDICAL STAFF.

The largest party in the history of the Women's Auxiliary of the Medical Staff of St. Luke's Hospital was held on Monday, February 24, in the nurses' lounge on Main 12 of the Hospital. One hundred and seven tables were sold to friends of the institution, who played bridge and at the same time assisted the Auxiliary in the splendid work which they are doing.

As described in the December issue of the NEWS, this group uses the proceeds to meet the needs of various departments of St. Luke's which have no specific appropriations available. Aside from dues of its members, the Auxiliary's only means of raising money is this annual affair.

★

Participating in a Symposium on Fractures given by the Chicago Medical Society on March 5, were Dr. Carlo Scuderi, Dr. William R. Cubbins, Dr. Harry Mock and Dr. Fremont Chandler.

The Greater St. Luke's

(Continued from page 3)

continuous education for the attending staff. This results in benefits to staff members and higher standards of medical service for their patients.

St. Luke's has working agreements and associations with four university medical schools in Chicago to which it offers clinical facilities for graduate and undergraduate teaching. Each week ten clinics are conducted for students of Illinois, Loyola, Northwestern, and Rush. In ten years 2,500 students have received instruction in these clinics, a substantial contribution toward their professional education.

Before the doctor is admitted to practice, state law requires that he serve an internship of at least one year in a qualified and approved hospital. The hospital is required to provide specific educational facilities and instruction.

St. Luke's internships are two years, and on July 1st the Hospital inaugurated another advanced step of medical education: a three year residency. This added service to science in particular and humanity at large added another financial burden to the Hospital.

In addition to these educational services, each year St. Luke's educates technicians in the Departments of Roentgenology, Pathology, Dietetics, Anaesthesia, Social Service, and others.

Another phase of St. Luke's program of development will be described in next month's NEWS.

Personnel

(Continued from page 9)

thousand persons—a city in itself. We know of no employed group of people outside the hospital field who can boast of so diversified a personnel. There are daily occupied within these walls:—

Doctors	Butchers
Technicians	Bakers
Nurses	Brace Makers
Accountants	Waitresses
Librarians	Floor Maids
Dietitians	Pantry Maids
Pharmacists	Orderlies
Engineers	Launderers
Firemen	Seamstresses
Painters	Elevator Oper-
Steam Fitters	ators
Electricians	Porters
Upholsterers	Bell Boys
Wall Washers	Scrubbers
Watchmen	Doormen
Chefs	Telephone Switch-
Cooks	board Operators
Stenographers	
Secretaries	

If you are still "tuned in" we would like to offer as a concluding sidelight,

a little incident which indicates what a personnel man has to tolerate from department heads in the selection of their help. A request for an experienced orderly was filled within one hour with a Johns Hopkins man of three years' experience. Upon being so informed, the D. H. said—"What, no Harvard men around?" For the sake of the two reputable institutions mentioned—the situation could be reversed without altering the point.

Student Government

(Continued from page 7)

the Cooperative Government Association meets three times a year.

During its first year of operation, the officers of the Association have given generously of their time and attention to develop the organization, and in this short time the group has proved invaluable in planning the social program and interpreting the rules and regulations to the student body. It is expected that the organization will do much to discover and develop special qualities and abilities in the students and help them to become all-around citizens with a broader outlook toward their place in the community.

The objectives of the association are more clearly set forth in the following excerpt from its constitution:

"It is understood that the aim of this organization is to aid in the education of young women in the art of nursing and citizenship. Each member of this organization shall feel that she is a very definite part of the vast program of nursing education, the standards of which she must uphold to the best of her ability.

"The purpose of this organization shall be to promote cooperation between

the students of the school and the Nursing Staff of the Hospital; to create a harmonious understanding within the student and faculty groups and to main-

tain with honor and judiciousness those virtues, values and high objectives which are fundamental to the School of Nursing."

The Blue Cross Grew from a Challenge

BY M. GOOCH

Treasurer

ONE evening about six years ago, the Chief Intern hurled a challenge at the private duty nursing group, and from it grew the Blue Cross Service Guild of St. Luke's Hospital.

"Do you give free nursing service to your graduates when they are ill?"

"No, we don't."

"Are you, as a group, typed as donors when blood transfusions are necessary?"

"No, we aren't."

These two negative replies could have been qualified, for in the past, many days of free nursing service had been given by classmates to classmates, but there were those who had no one near hand to give this service and an outside graduate could not be called in as a volunteer. Whenever blood transfusions had been necessary, the internes had always responded readily, without any thought of remuneration.

This challenge was food for thought and it was discussed by the private duty group at midnight supper. They decided to organize a Guild whose objective would be to raise a fund which would provide nursing service and remuneration for donors for blood trans-

fusions for graduate nurses.

The Guild was organized March 15, 1935 and has given nursing service to 35 nurses, amounting to \$1,978, if they had had to pay for it. Any St. Luke's graduate may become a life member of the Guild upon payment of \$1.00.

Finances were an important question in the beginning, but the Guild has raised a fund which is taking care of all needs. They have given four bazaars, two dances, card parties and a candy sale. This year, they raffled off an automobile, and many patients have given generous gifts to help swell the coffers.

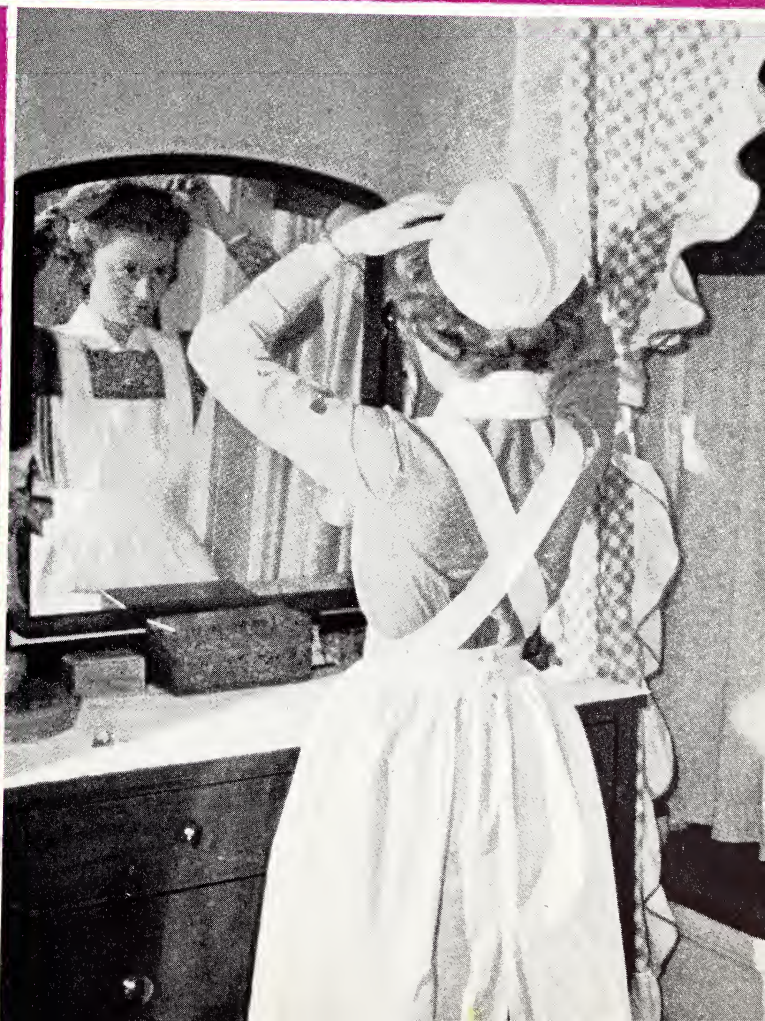
The graduate group is also grateful to the Medical Staff, who have given so freely of their time and skill to all their members and to the Hospital and its personnel, who are always looking out for their comfort and welfare. The Alumnae Association has three endowed rooms where, for \$50, a nurse may have four weeks of free care each year.

From such a small conversation, the Guild has grown to a point where it is meeting a long needed service and with the help of its friends, should continue to do so.



A NEW EMPLOYEE LEARNS HIS WAY ABOUT THE HOSPITAL

St. Luke's NEWS



APRIL 1941

Volume 2 Number 4

The Greater St. Luke's

(This is the sixth in a series of articles on St. Luke's program of development which was announced last fall.)

IN PREVIOUS articles we have discussed the plans for a Greater St. Luke's in terms of buildings and equipment. Presupposing that St. Luke's plans become buildings and improvements, the Hospital will need dollars to operate them. Operating at a deficit with the present plant, how shall the Hospital care for more out-patients, extend free hospital service, and broaden educational facilities? The answer lies in one word: Endowment. The Hospital must have a larger endowment if the plans for a greater St. Luke's are to be realized.

St. Luke's has an endowment of \$1,235,363.81. Inadequate for immediate needs, it is woefully small alongside the endowments of comparable institutions. With a composite record of age, size, and service unexcelled by any Chicago hospital of its type, St. Luke's endowment position is not enviable. The following figures of hospitals engaging in general service tell a stark story:

Hospital	Beds	Ownership or Control	Endowment
A (New York)	517	Church	\$8,531,228.80
B (Chicago)	378	Church	4,179,409.95
C (Chicago)	597	Non-Profit Assn.	2,983,000.00
D (Boston)	250	Non-Profit Assn.	2,047,839.19
E (St. Louis)	400	Church	1,885,554.91
F (Chicago)	247	Church	1,798,353.47
G (Chicago)	228	Non-Profit Assn.	1,372,847.28
ST. LUKE'S	435	Non-Profit Assn.	1,235,363.81

These unadorned figures take no account of factors of hospital ownership, control, or affiliation which operate to the greater advantage of several of the institutions compared to St. Luke's. These factors aside, the figures become still more unfavorable when they are measured by the yardstick of size, than which there is no more accurate endowment measuring rod. Thus measured, the eight hospitals operate with the following average endowment per bed:

Hospital

A	\$16,501
B	11,057
D	8,191
F	7,281
G	6,021
C	4,997
E	4,714
ST. LUKE'S	2,840

St. Luke's needs \$3,764,636 to bring its endowment to a minimum requirement of \$5,000,000 for specific and general purposes to escape operating at a deficit and to serve the community and the cause of medical education as they should be served by this Hospital. If St. Luke's is to do this, an urgent necessity is endowment for the specific purposes of free beds and free clinical services. The better St. Luke's in a field of greater service should have about 100 free beds for teaching purposes, supported solely by income from endowment. Here, indeed, is an opportunity seldom equalled for an enduring investment in the well-being of mankind.

St. Luke's of the Future

St. Luke's program of development is one to challenge all of its friends, and not only them, but all who have at heart the welfare of their fellowmen. If the challenge is met, and St. Luke's does not doubt that it will be met, this will be the reward in terms of the Greater St. Luke's:

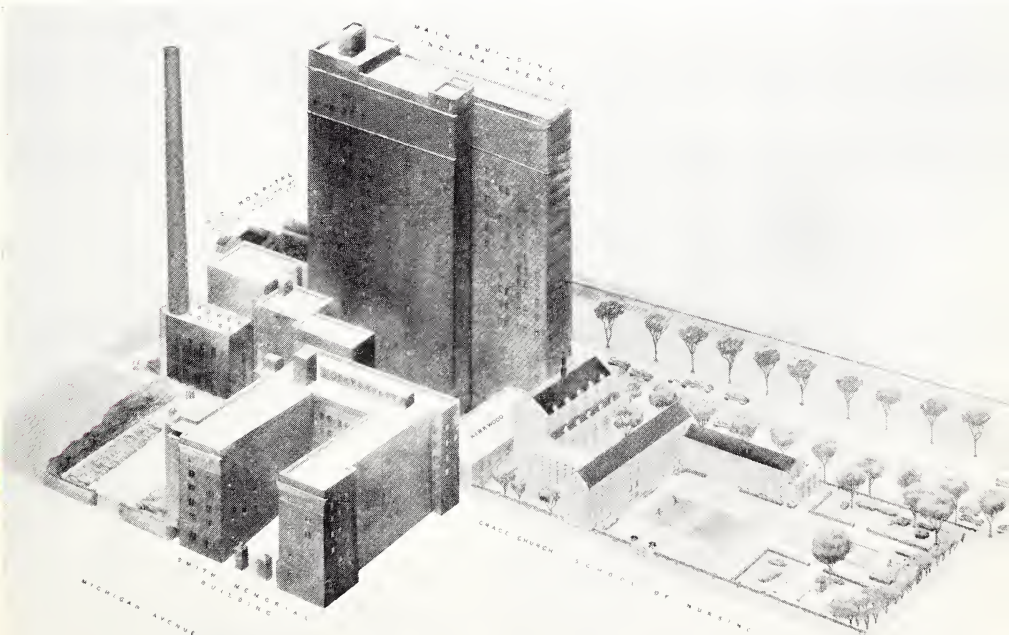
- (1) A Hospital with 650 beds plus bassinets.
- (2) A Hospital that will house 425 nurses.
- (3) A Hospital that will house about seventy internes.
- (4) A Hospital with an efficient and modern plant of fireproof construction.
- (5) A Hospital that will do an amount of free work commensurate with its obligation to the community and the requirements of a teaching hospital.
- (6) A Hospital that should be, and probably would be, the great-

est general voluntary teaching hospital in the Middle West.

None can foresee all the obstacles to the accomplishment of these aims, and none can foretell the time the program must take. Yet the program must be undertaken, and never such a time as this to set out upon the road of accomplishment. For if we abandon philanthropy, we pay the price of endangering Americanism itself. Individual responsibility cannot be divorced from freedom. They are inseparable as the two sides of a wall.

The labors of men of science and the philanthropies of men of good will have been interwoven through the years to make St. Luke's what it is. Such labors and philanthropies are now needed to make St. Luke's what it ought to be.

St. Luke's proudly and gratefully points to those whose gifts have made possible the Hospital of today. Their splendid example has marked the path to be followed toward the Greater St. Luke's.



What a Student Nurse Can Do in a Day

BY HELEN KOUTSOGLANIS

COLD, gray, dawn! And where are the skirt and sweater of yester-year? In their place a stiffly starched uniform and a dazzling white apron. And a touch of powder here; a dab of rouge there; lipstick—but no! Then to don the perky St. Luke's cap to make early rising a mere coquetry. Curls, back or front, waves on either side, all look trim and neat under this bit of pleated white organdie.

Breakfast is short and snappy! Morning report; a fast quarter hour of concentration and then—interminable bed baths!—finished in two hours? Impossible—charting all done? Well, try to help—oh, wait! Here's an emergency. Hot water bottles—caffeine—call interne—get fluids—glucose. Speed,

precision and the patient is in the operating room in 10 minutes.

Make up his ether bed, check his clothes. He'll be down in $\frac{1}{2}$ hour—Returned so soon? Really, our speed saved his life? Well, glad to do it—and off to our 11 o'clock class.

Dinner time. Meet all your friends. "Your patient did what?" "Who has the dressing room?" "Coming to Sewing club tonight?"

And now, off duty until 3:30. What to do? Let's tear downtown. Strip off your uniform, but hang it up neatly. Climb into casual clothes, create alluring curls and on with the lipstick.

Let's buy; a dashing picture for your room; material for draperies or bed-



spread, white cotton hose. Let's stop at the Art Institute on the way back—see that new exhibit. Surely, it's free today!

Let's just sit and talk until 3:30—an hour of gossip, jokes, and a light, extemporaneous lunch. We just have time for tea on Main 12.

Back on duty; "probies" everywhere. Faces and hands to wash. Backs to rub. Tonight's the chance to help Doctor X with that marvelous dressing! These things and supper finish the day.

Chapel tonight. A quiet prayer, a lovely hymn! (Did you know our Jennie plays the organ?)

Back to Saranac and our rooms. Dress in a skirt and sweater! Grab your knitting or crocheting—or sewing of any kind and we're off to a noisy, jolly sewing club in Stickney; study—tomorrow night!

Look, I've nearly finished our draperies! It's only 10:15—let's run out to the drug store and indulge in a "coke."



It's back to our rooms by 10:30. Rush to the bathroom to clean white shoes. And "Don't forget, roommate, we're going to STUDY, tomorrow night!"





ADDED TO THE COVER PHOTOGRAPHS, WE HAVE TRIED IN THE PICTURES ON PAGES 4, 5 AND 6, TO GIVE YOU A GLIMPSE INTO THE LIFE OF A STUDENT NURSE, WHICH MISS KOUTSOGIANIS HAS DESCRIBED WITH SUCH A JAUNTY AIR



Maintenance Department Serves Entire Hospital

BY J. R. KELLY

Superintendent

MAIINTENANCE in any large hospital covers a wide range of activities, most of which are, generally speaking, seldom seen by the public or the patient. That is as it should be. These activities however, form an integral part of the hospital's operations and play their part towards its principal objective—care and comfort of the ill.

Unlike industrial or commercial maintenance problems, those faced in a hospital are unique in that a great many factors and conditions peculiar only to a hospital must be considered. The approach to, or the solution of any particular maintenance job may even change from one day to the next.

At St. Luke's, maintenance comprises four principal divisions. Engineering (Heat, Light and Power) Laundry, Housekeeping and General Maintenance and Repairs. Each of these divisions is a large department in itself, headed by a competent individual who is responsible for its proper function. But because much of the work of these divisions is interlocking, they are especially closely coordinated and function either jointly or independently as occasion demands. For the present only a "bird's eye view," of one division—general maintenance and repairs—will be given.

St. Luke's plant consists of seven buildings, connected by ramps and passageways. They are from 2 to 21 stories, totaling 57 floors and range in age from 16 to 59 years. On only 16

of these floors are patients hospitalized. The remainder are for the many varied departments and functions of the hospital as a whole and for the housing of professional and non-professional personnel.

To maintain this plant, its equipment and furnishings, to do our part in the hospital's daily requirements, in that it will maintain the high standards for which it is justly known is our task. This work costs annually approximately \$145,000.

To give just a few of the items that go into that amount, \$4900.00 is spent annually for window washing alone. The maintenance of floors (cleaning alone) costs \$25,000.00. The hospital employs fifteen men, exclusively for painting and wall washing. Their wages and supplies add another \$26,000.00. Carpenters, plumbers and many other employees are retained for numerous other activities.

A few years ago the Board of Trustees inaugurated a program of rehabilitation of the entire plant. This included not only the rehabilitation of present facilities and equipment, but in several instances the building of entirely new departments, or completely new floors. The color schemes were changed throughout the whole hospital. Dark, somber colors gave way to light, cheerful colors. Whole departments were sometimes moved, others enlarged or otherwise improved. All private and semi private accommodations were completely modernized and through the generosity of



ONLY ONE PART OF THE MAINTENANCE DEPARTMENT IS REPRESENTED IN THIS SCENE IN THE CARPENTER SHOP

many good friends entirely new furnishings and fixtures installed. As much of this work as possible was done by our own organization. Only when we lack the equipment or other facilities for special jobs do we go outside of our own organization to have it done.

Several of our buildings are very old. Much of our equipment is likewise old, and while kept in the best condition possible, time and constant usage over many years takes its inevitable toll. Maintenance costs and maintenance problems are invariably relative to age.

Let's Decorate a Room

BY MRS. OPAL G. MANNEY

Housekeeping Department

THE average person seldom thinks of hospital personnel beyond the doctors, nurses and orderlies, the unseen workers are seldom thought about. Have you ever considered a hospital having a housekeeper? What do you think she does? Probably you have a vague idea of scrubbing brushes and strong soaps, and large amounts of clean linen.

But if you have been a guest at a modern hospital, you may have wondered at the soft colors, the attractive furnishings and drapes, and tried to reconcile these things with your former ideas of white walls and iron beds. You might like to go with us and watch a room being decorated—we'd be glad to have you.

First the interior decorator consults

with the Director of St. Luke's and one or more members of our Woman's Board. They decide on a two-tone room, with yellow walls, furniture and draperies, and a turquoise blue rug. The yellow must be the right color for the comfort of the patient's eyes, and many samples are considered.

After the color has been chosen and the materials bought, a sample is given to our head painter to match exactly. The Housekeeper measures, cuts and pins the drapes and screen panels and sends them to the Linen Room for stitching.

This is, of course, a highly cooperative undertaking involving many departments of the Hospital. The Maintenance Department now enters the scene. They strip the room of all hardware and send it to the maintenance shop to be rehabilitated. New plumbing replacements are brought by the Superintendent of Buildings, to be installed when the room is ready.

The painters then take over. They wash the walls, plaster cracks and strip

the doors and windows of old varnish before the actual painting begins. It takes approximately three weeks to complete the room, the color gradually coming to life as though the room were bathed in sunshine. The radiators are covered with aluminum bronze and the doors and window frames are re-varnished. The new plumbing fixtures are put in place.

After the painting is completed, the room is again turned over to the Maintenance Department. The lighting fixtures, hinges and door plates are installed. Then, the Housekeeping Department once more takes charge. The terazza floors are scrubbed with steel wool and the scrubbing machine; the windows are washed by the houseman who carefully removes any traces of varnish.

The room is ready for its lovely new furniture, purchased through the Furnishing Committee of the Woman's Board. The rug almost covers the entire floor and is cut and fitted by our rug man. The new bed, yellow with chrome

"THE PAINTERS THEN TAKE OVER"





trimming, has an adjustable head and foot rest, a built-in bed lamp and an overbed table. We have two large upholstered chairs and an ottoman, one large tubular chair with a soft leather cushion and a desk chair. The yellow metal dresser has a beveled mirror to hang just above it; and the desk and bedside table match it in color. There is a studio couch, which can be converted into a bed for a visiting relative, and its color is the same shade as that of the rug.

The studio couch and the upholstered furniture are vacuumed and dry cleaned. Two efficient maids clean the entire room in the best hospital standards. When everything sparkles and shines, the houseman, with deft hands, puts up the lovely yellow mohair drapes and puts the yellow taffeta slip covers on the upholstered chairs.

The lighting is carefully checked in

each of the lamps, the best wattage for each fixture. Telephone books, a blotter, an ash tray and ink are equipment for the desk. Coat hangers for the closet, towels and soap for the bathroom. A scarf for the dresser and on top the announcement of the St. Luke's Shop in the lobby.

The new room is ready for patients now, inviting with its soft colors and modern furniture, and spotless in the hospital tradition. The housekeeper now turns it over to the Nursing Department, but she will see it again in her regular inspections of the Hospital's rooms.

If you have ever re-decorated your home, you know just how much fun and trouble it can be. And with us, you have just re-decorated a hospital room. The fun and the trouble were the same, and the results, we hope, were satisfactory—to the patients and to the doctors.

The Education of the Diabetic Child

BY JEANETTE OWENS

Metabolic Dietitian

IT WAS three years ago that they brought an extremely malnourished child into the hospital. She was in a condition of coma and was only partially conscious of what was going on about her. There was a definite sweetish odor to her breath which is typical of a diabetic coma.

Frances was tall for her eleven years and very pretty in spite of her underweight and peaked appearance. She was put to bed in the children's ward and numerous laboratory tests were taken. They all confirmed the doctor's diagnosis of Diabetes Mellitus and she was given the treatment for diabetic coma.

After a period of two days Frances gradually began to take an interest in her surroundings and her diabetes was getting under control. In talking to her we knew that she was very intelligent—probably superior to her classmates in school, as diabetic children often have a high I.Q. She had been one of two children in her class to win a Dudley Crafts Watson Scholarship at the Art Institute. She was interested in learning about her diet and her insulin dosage.

The diabetic dietitian teaches Frances and the other diabetic patients how to take care of themselves after they get home. She also plans and supervises their menus while in the hospital. It is her duty to consult with the patient and with the doctor, for it is important in the patients care to know their history and to keep an accurate check on their progress in the hospital. The dietitian



FRANCES,
BEFORE AND
AFTER

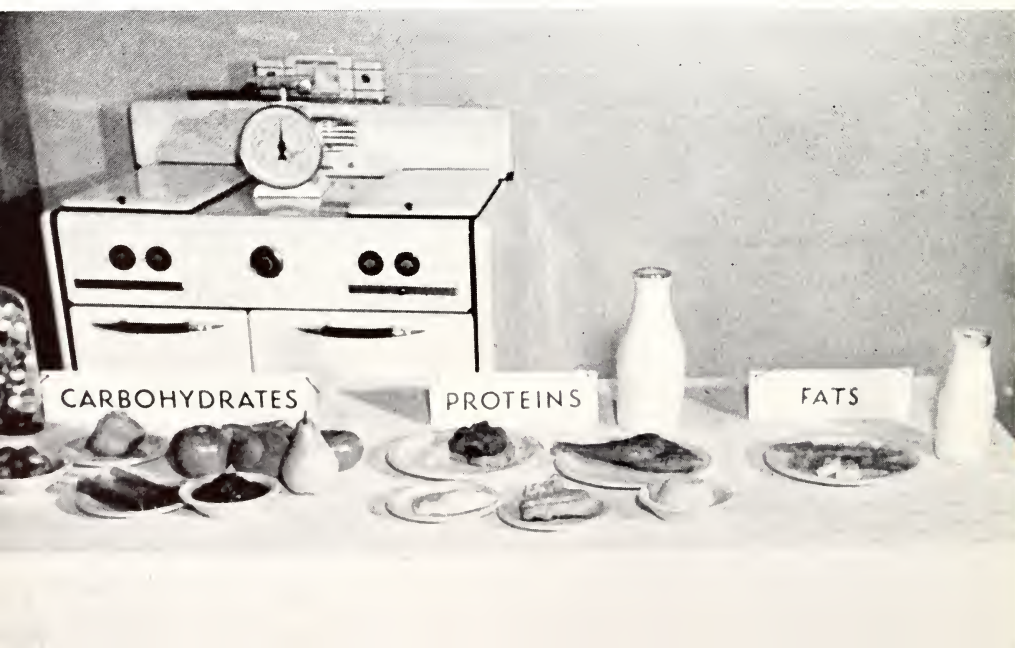




"SHE WAS TAUGHT HOW TO CALCULATE HER DIET . . . THAT THE CARBOHYDRATES ARE THE ENERGY FOODS—THAT PROTEIN FOODS ARE THOSE . . . FOR GROWTH AND REPAIR . . . THAT THE FAT FOODS WOULD GIVE HER HEAT AND ENERGY"

also checks each diet before it reaches the patient and checks the amount of food eaten at each meal. When a portion of food is left it must be translated into terms of glucose value and the patient given fruit juice to replace it.

Another few days and Frances was allowed out of bed. Her diet was adequate as to the protein content, vitamins, minerals, calories, and high enough in carbohydrate foods to keep her from being too hungry. As she was at the age when she was growing rapidly, her diet had to be very much like that of other children's. For one hour each day she was allowed to come to the dietitian's office where she learned that Diabetes is a disturbance that dates back to the early Greek period—that it is brought about by the inability of the pancreas to secrete enough insulin "to burn" the sugar. The sugar, instead of being utilized by the body for energy and strength, goes into the blood stream, producing a high blood sugar, and into the urine. Normally there is some sugar present in the blood but a diabetic has a higher percentage than a non-diabetic. The urine under normal



conditions does not have sugar and when sugar does appear in the urine it is one of the first symptoms of diabetes. Other symptoms of diabetes are thirst, hunger, with a loss in weight and strength and the passage of an increased amount of urine. If the pancreas produces only a partial amount of insulin, then the storage of sugar is interfered with and a supply of insulin must be given through a hypodermic injection.

Frances showed a keen interest in diabetes and was eager to learn everything concerning it. She was taught how to calculate her diet, and learned that the carbohydrate foods are the sugars and starches and that they are the energy foods—that protein foods are those which supply the tissues with material for growth and repair—and that the fat foods would give her heat and energy. Because growth is very rapid in adolescence, Frances' protein had to be kept high. These three types of food were calculated and divided into her meals for the day according to the diet which the doctor prescribed.

Frances was taught the use of a gram scale and how to weigh her food. She was allowed to plan her diet and weigh out her food in order that she would know how to take care of herself after she left the hospital. Her mother was taught how to do all of these things too, but as her mother worked, most of the responsibility would fall to Frances when she got home.

Insulin management was her next problem to master. She learned that insulin must be measured accurately on her insulin leuc and carefully injected under the skin. She was also taught how to make the Benedict's test for sugar in the urine. To make this test she must use Benedict's Qualitative solution. It is bright blue in color—when urine is added to the solution and heated for five minutes the solution will

change to a bright orange or red if there is a goodly amount of sugar in the urine. If there is a trace of sugar present the solution will turn green and if no sugar the solution remains its original color.

One day we asked Frances to appear before a class of student nurses. She told them the story of diabetes—how she was going to take care of her diet when she returned home and she demonstrated the use of insulin by giving herself an injection. She answered numerous questions asked by the nurses and they were surprised that a youngster knew so much about diabetes.

Since her dismissal from the hospital Frances has been well except for two occasions, when she developed severe colds and was admitted to the hospital for treatment. She has gained fifty-five pounds since the first time she
(Continued on page 14)

"INSULIN MANAGEMENT WAS HER NEXT PROBLEM TO MASTER."



Around the Hospital

St. Luke's News

Devoted to the welfare of

St. Luke's Hospital

Information for the friends of the Hospital
regarding its service, personnel, affairs,
accomplishments, and aspirations.

Published each month by St. Luke's Hospital
1439 South Michigan Avenue
Chicago, Illinois

Editor MARION B. PIERCE

ADVISORY COMMITTEE

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DR. SELIM W. MCARTHUR, *President Medical Staff*

CHARLES A. WORDELL, *Director*

Vol. 2 APRIL, 1941 No. 4

E. C. H. Pearson, formerly Assistant Director of St. Luke's, who left to become the director of the Duval County Hospital in Jacksonville, Florida, has recently been appointed Director of the Good Samaritan Hospital in West Palm Beach, Florida. His many friends at St. Luke's join the NEWS in wishing him happiness and success in his new position.

★

Mr. William Mock gave a short lecture on "War Hospital Conditions in Finland" at the Hospital on March 28. Mr. Mock is the son of St. Luke's Dr. H. E. Mock, and returned to Chi-

cago on March 8, after having been in Europe since June, 1939.

During a short interview after his lecture, it was interesting to learn that there does not seem to be a shortage of doctors and nurses in Europe at the present time and that all casualties are taken care of adequately. Mr. Mock also stated however, that in view of the present emergency, America should continue to train more doctors and nurses and brought out the fact that almost every German girl is given some elementary training in nursing.

★

Have you seen the new postcards of St. Luke's Hospital in the Shop?

★

The Junior Class of St. Luke's School of Nursing gave an "April Showers" dance on Main 13, April 29. The proceeds will be used to defray expenses for the junior-senior prom.

★

Be sure to see the new folding wheel chair at the Shop. This chair can be adapted for any kind of physical disability.

★

The NEWS joins his many friends in expressing deep sympathy to Dr. Lee Strohl on the recent death of his wife.

Diabetic Child

(Continued from page 13)

was brought to the hospital, and her present picture is a healthy, robust and smiling young girl,—a grade A student in her High School class. Her mother often remarks, "I never have to worry about Frances as she takes care of her diet and insulin herself."

This is a sample menu of Frances's diet for one day—

<i>Breakfast</i>	Grams	Measure
Orange juice	100	$\frac{1}{2}$ cup
Oatmeal	140	$\frac{2}{3}$ cup
Toast	30	1 slice
Bacon	30	2 strips
Egg		1
Butter	10	1 square
Milk	200	1 glass

10 A.M.

Apple	80	1 small sized
-------------	----	---------------

Luncheon

Cold sliced chicken	60	1 medium serving
Fresh green beans.....	100	$\frac{1}{2}$ cup
Sliced tomato.....	100	1 medium sized
Bread	30	1 slice
Butter	20	2 squares
Milk	200	1 glass
Grapefruit	130	$\frac{1}{2}$ medium sized

3 P.M.

Milk	200	1 glass
------------	-----	---------

Dinner

Broiled lamb chop.	60	1 medium chop
Asparagus	100	5 stalks
Celery hearts.....	100	$\frac{1}{2}$ medium heart
Baked potato.....	100	1 small
Butter	20	2 squares
Milk	200	1 glass
Diabetic Ice Cream	100	1 scoop

Bedtime

Milk	200	1 glass
Soda Crackers....	14	2 squares

★

The Shop invites you to see the new shipment of attractive gifts which have just arrived from Finland and China.

St. Luke's Graduate to Sail for England

An interesting news item in this war torn world concerns Barbara Neal, Class of 1939, St. Luke's School of Nursing. Miss Neal will sail late in June or the early part of July for England. She will be a member of the group sponsored by the American Red



BARBARA NEAL

Cross and Harvard University for the proposed establishment of a 100 bed hospital in England for the study and treatment of communicable diseases under wartime conditions.

Harvard University will also sponsor a Public Health Unit for field and laboratory work in epidemiology in Great Britain and this Unit will work together with the Hospital on such problems. The hospital will be known as the American Red Cross—Harvard Hospital and will be financed and constructed by the Red Cross and the University will furnish the medical staff and assume responsibility for the scientific work.



St. Luke's NEWS



May 1941

Volume 2 Number 5

\$300,000 Already Pledged For New Nurses' Residence

WHEN the "Greater St. Luke's" building program was announced last fall, everyone agreed that there was a definite need for a complete hospital such as St. Luke's plans. Few persons, however, thought it possible, in these times, to get the financial support necessary for the fulfillment of the program. One daily newspaper referred to the plans as a "dream."

While a large portion of the program of development is still a distant vision, it is a vision—not a mirage. The first unit of the program, which will provide housing and recreational accommodations for 293 nurses, is on its way to becoming steel and stone.

Credit for this remarkable beginning must be given to certain groups affiliated with St. Luke's who firmly believe the job can and must be done. Among these groups are: Our Board of Trustees, who have already pledged their financial support to the program; the Woman's Board, a comparatively small group of women who have made their annual Fashion Show an event of country-wide interest; the Medical Staff who have never hesitated to lend their influence to an effort which would improve the Hospital's facilities for caring for the sick and needy; and a large and ever-increasing group of friends with a very definite interest in the welfare of their community. All of these groups are determined to build the "Greater St. Luke's" and their concerted efforts have produced results.

One Trustee recently flew to California, at his own expense, and returned with a \$100,000 gift for the new Nurses' Residence. He made two more calls (closer to home) and came back to the Hospital with another gift of \$100,000 and one of \$25,000. "My friends will begin crossing to the opposite side of the street when they see me coming," said the Trustee, "but I don't care—it's a great cause."

The Trustees, doctors, and members of the Woman's Board have formed a Campaign Committee under the chairmanship of Mr. Sterling Morton with Dr. Joseph A. Capps as vice-chairman. Members of the Committee at present include: Cyrus H. Adams, John D. Allen, Chauncey B. Borland, Britton I. Budd, T. J. Carney, Mrs. John W. Gary, Mrs. Frank P. Hixon, Samuel Insull, Jr., Mrs. Charles F. Glore, Mrs. Grant H. Laing, L. L. McArthur, Jr., Dr. Selim W. McArthur, Mrs. Sterling Morton, Joseph T. Ryerson, Charles H. Schweppe, Walter B. Smith, Dr. Walter H. Theobald, and C. J. Whipple. This is not a "closed committee." Every member of the Board of Trustees, Medical staff, and Woman's Board is considered a potential member.

To date, members of this Committee have been able to raise more than \$300,000 of the \$650,000 needed for the new Nurses' Home. A mail appeal sent to some former patients and friends of the Hospital, resulted in a number of gifts ranging from \$10 to

\$500 and totalling more than \$10,000. These two efforts—personal solicitation and appeal by mail—are expected to raise the balance of the \$350,000 needed to begin work on the first unit of the building program.

The new Nurses' Residence is our most urgent and immediate need. It will enable us to tear down the two ancient buildings now used to house nurses. Upon its completion two floors of Main Building now housing students would be available for much needed additional ward space. This additional room for patients is very necessary. For months St. Luke's has been operating to capacity. While this has increased the Hospital's revenue, it has added to the cost of operation proportionately.

A new Nurses' Home is important for other reasons. Since its inauguration in 1885, St. Luke's School of Nursing has accepted only the highest type students. The School teaches care of the sick, prevention of sickness, and the principles of good health. In their three-year period of education, students are given courses in the basic medical sciences that in many ways are better and more thorough than those given to the medical student of a generation ago. Students have left the Hospital assured that the world at large was aware of the School's excellence.

Consequently, you will find St. Luke's graduates in positions of importance, administrative or educational, throughout the world.

If we are to maintain this reputation for excellence, we must continue to attract the highest type of student and also compete with broadened opportunities for capable women in other fields. To do this, we must offer not only the best in educational facilities, but comfortable and adequate living accommodations as well.

St. Luke's is located in an area almost entirely industrial. While its close proximity to the heart of Chicago has saved many lives that might have been lost in time of emergency, its location presents a problem in housing for that part of the nursing staff which must now live out of the hospital.

The new Nurses' Residence will provide a social lounge and simple, but comfortable, rooms for 293 persons with provisions that additions can be made to the residence as our increased patient capacity requires more nurses.

As readers of the NEWS have learned through previous articles, the Hospital has additional plans. We want to build a Service Building which will house all administrative offices, provide centralized kitchens and dining rooms,

(Continued on page 14)

PROPOSED NEW RESIDENCE FOR NURSES



Internship Completes Medical Course

BY JOSEPH A. DAVIS
PLINY NORCROSS

The Resident Staff

THE essential purpose of the general internship is to round out the medical graduate's theoretic training before he enters into the general practice of medicine. It is not to equip him for any specialty. The period of internship, in addition, is required by the State of Illinois as well as the majority of the other states as part of the educational course to be completed before medical students are admitted to examinations for the license to practice medicine in this state. The internship at St. Luke's Hospital, in consequence, is an essential part of the educational system of the State of Illinois. The majority of the medical schools which

St. Luke's Hospital interns have attended demand a successful completion of an approved hospital internship as a requirement for graduation. The hospital, therefore, is in fact the fifth year of medical school for the intern. A fortunate coincident from the point of view of the interns is that the majority of staff doctors of the hospital are affiliated with the several medical schools in Chicago and are actively engaged in medical teaching or research.

At St. Luke's there are fifty-five resident medical staff members. The "interns" are selected each year by competitive examination and the appointments are made by the director of the

"THE 'INTERNS' ARE SELECTED BY COMPETITIVE EXAMINATION"





CLINICAL PATHOLOGICAL CONFERENCE (GRAND ROUNDS) HELD EVERY FRIDAY

Hospital on advice of the intern committee. The internship is of two years' duration, during which the intern rotates "services." He will spend six months on a general surgery service, six months on general medicine, and one and a half months each on obstetrics, gynecology, orthopedic surgery, urology, pediatrics, eye, ear, nose and throat, anesthesia and X-ray, and a mixed general service.

Though all the resident staff members are not interns they are designated as "residents." There are seventeen residents at St. Luke's. These men are in the process of specializing in various fields such as surgery, medicine, pathology, psychiatry, X-ray, obstetrics, gynecology, and brain surgery. These residents have completed their "internship" and are now receiving training to meet the requirements of the American Specialty Boards. Most of the residencies are of three years' duration. In addition to the medical interns and residents are one dental intern and also two

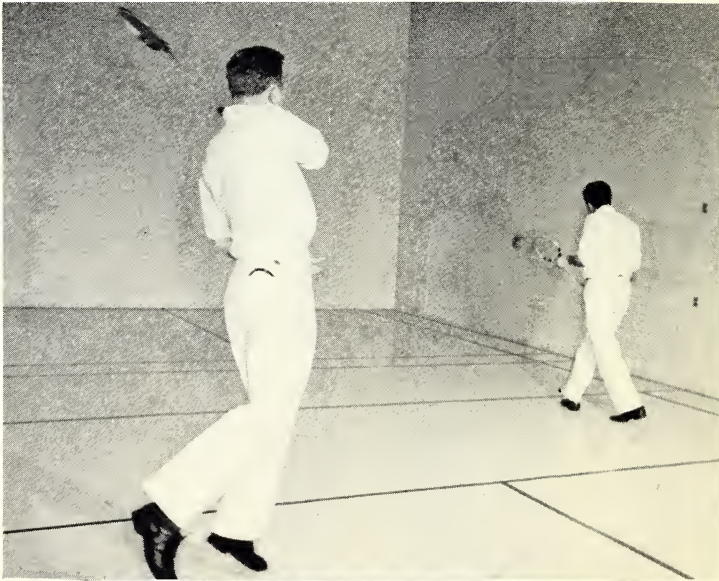
physicians who spend all their time in the emergency and examining room.

The resident staff member takes professional charge of all cases admitted to his service under the supervision of the attending physician. The first year intern is responsible for the blood counts and urine examinations on service patients. If time permits, the intern visits all patients on his service at least twice a day and, of course, more often if necessary. He is subject to call at all times: it appears he is "more subject" while asleep. Orders to nurses, requests for consultations, insurance papers, birth certificates, death certificates, reports of communicable diseases usually fall to the intern's lot.

The intern on surgery readily is aware that skill in diagnosis and post operative treatment is more important than the learning of technical operative procedures. So interns may follow their cases closely, they may act as first or second assistants in the operating room whenever possible: in other words, he



LEFT: THE INTERNS' LOUNGE
CENTER: THE SQUASH COURT
LOWER: REFRESHMENTS IN
THE SHOP



"scrubs." Depending upon his period of training and ability, an intern is permitted to perform surgical procedures on service patients under the constant supervision and with the help of a staff surgeon. Surgical dressings are assigned to the intern: he thereby can observe the post-operative course. On anesthesia service he obtains instruction and experience in the administration of the various kinds of anesthetics under the supervision of experienced anesthetists.

The number of interns at St. Luke's Hospital is sufficient to permit each one to study his case thoroughly. He records a medical history, performs a physical examination and makes a diagnosis on each private and free case on his service.

Several specific educational advantages at St. Luke's Hospital are maintained for the benefit of the resident staff, attending staff, and the patient. A clinical pathological conference meets on Main-10 each Friday morning from 9 to 10 o'clock. Interesting cases are presented with a general discussion thereof. Attending surgeons do not schedule operations during this hour so all the interns may attend. On Wednesday morning at 9 A.M. the Tumor Clinic Group meets, and patients with tumors are examined and a plan of management decided upon. Every day in the X-ray department at 3 P.M. there is a conference and the significant X-rays of the day are discussed in a very informal and instructive manner. At the same time each day there is a pathological conference on Main-18, with one to two hours of instruction in gross and microscopic pathology. Teaching clinics are presented for the students from various medical schools several times per week. Resident staff members prepare the history of the patient and assist in its presentation to the medical students. St. Luke's Hos-

pital has an excellent intern's library comprising about 8,000 volumes of medical texts and periodicals. Interns are encouraged to read medical literature in connection with the cases on their service so they may be up-to-date and familiar with their management.

The interns' quarters have been renovated and are much better now than before. A recently remodeled handball-squash-badminton court is used daily and is greatly appreciated. Two pianos, a billiard room, a ping-pong table, and a card room complete the equipment for extra-curricular activities.

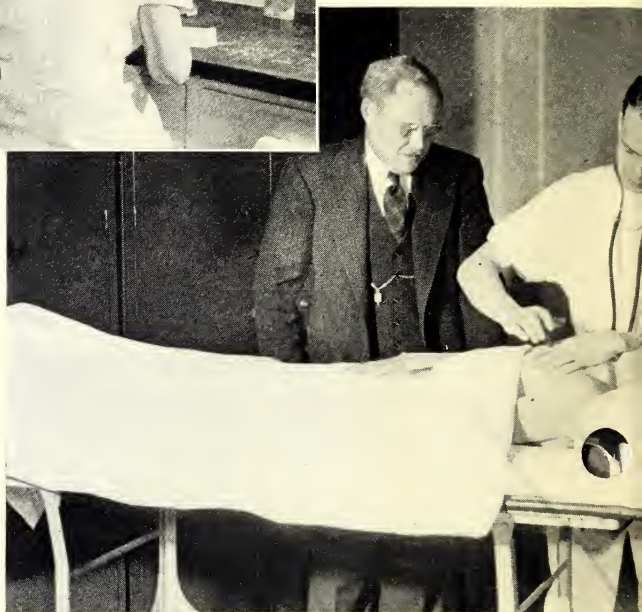
Some 60,000 patients visit the Out-Patient Department Clinics annually. Working in these clinics, the intern learns to prescribe for, study and treat ambulatory patients. Many of these patients present themselves for treatment of minor disorders such as the

MAKING ROUNDS WITH A STAFF PHYSICIAN





ABOVE: PATHOLOGICAL CONFERENCE—THE INTERNS ARE EXAMINING SPECIMENS AND DICTATING THEIR FINDINGS TO THE STENOGRAPHER.



ABOVE: AN INTERN MAKING AN EXAMINATION UNDER THE SUPERVISION OF A STAFF MEMBER.

general practitioner encounters daily. Many others, however, are more seriously ill, perhaps in need of immediate hospitalization or active therapy. The intern must evaluate these cases as they come into the clinic and see that they are referred to the proper staff physician or "resident" for management.

The average resident staff member is about twenty-eight years of age. Fifteen

states and Canada are represented ranging from Washington to New Jersey and from Ontario to Texas. Twenty-nine of the present fifty-five resident staff members are married. Fifteen of these having heirs in the crib or on order. All of the interns have a sleep debt, complain about the food, and do not have to worry about the income tax.

A Busy Day For Interns



ABOVE: WORKING IN THE INTERNS' LABORATORY.

BELOW: DAILY CONFERENCE AND DISCUSSION OF X-RAYS.



Why New Books and Journals Are Essential to the Medical Library

BY E. EVALYN McNALLY

*Chairman, Library Committee,
Women's Auxiliary to the Medical Staff*

"SELIM, would you like to have my medical library?" It was 1920 and Dr. L. L. McArthur was talking to his son after he had decided to close his house.

"Would I like to have it? Of course, I'd like to have it." Selim McArthur thought with pleasure of the invaluable volumes that had always been a part of his parent's household. It would be wonderful to have those books in his own home now that his father did not wish to keep them. "I'll be at the house tomorrow and we can make arrangements." *

But that tomorrow never came for Dr. Selim McArthur. For the next day at St. Luke's he learned that his father had given his entire medical library, totaling more than 1500 volumes, to the hospital! Up to that time while there had been no formal library at St. Luke's, the hospital had of course subscribed to a number of outstanding scientific periodicals. Dr. L. L. McArthur had decided that a well-equipped library was essential to the growth and development of a great institution. And how right he was. Shortly thereafter Dr. Joseph L. Miller and Dr. Arthur R. Elliott rounded out the original gift with contributions of a great number of books from their libraries. Later, many invaluable reference works were received

from Dr. Louis E. Schmidt. Today, the library that was started by Dr. McArthur's gift now houses more than 78000 medical books. Approximately 100 different medical journals, some weekly, some monthly, and some quarterly, are subscribed to annually.

With the growth of the hospital, the nursing school, and the staff, the Medical Library becomes an increasingly important part of St. Luke's. Through research, which can only be done in an adequately stocked library, notable contributions by members of the medical staff of St. Luke's Hospital are made possible. To do outstanding work in the field of letters, reference literature must be complete and up-to-date. That is why the Women's Auxiliary of the Medical Board adopted the Medical Library as a permanent project of the organization. Each year, the Auxiliary has contributed increasing amounts for the purchase of the latest textbooks in all fields of medicine.

New references are needed not only for the use of the doctors on the attending staff, the interns, and the nurses, but because they are essential for an equitable rating by the American Medical Association. The requirements for a hospital the size of St. Luke's are more exacting than for a small hospital and a certain minimal number of new books must be added each year in order that the library be officially approved.

Early this year the examiner from the

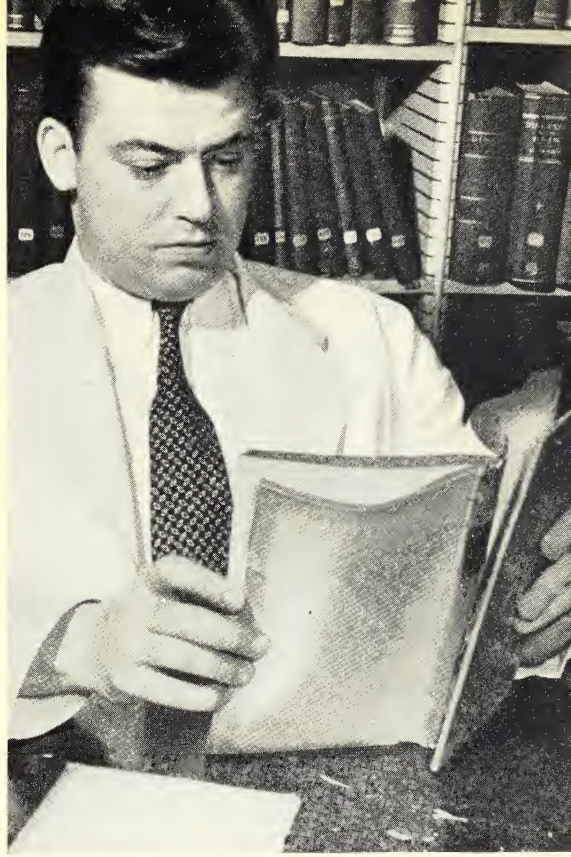
* Now Selim McArthur says: "Thank God, he didn't give me the library! Living all my life in a tenement, I wouldn't know what to do with it."

American Medical Association visited the St. Luke's Medical Library. As is customary he browsed around the library, looked at the shelves and then called for certain titles. Cards were pulled and the books requested were taken from the stacks. The examiner looked at the volumes critically. The old copyright dates were not at all satisfactory and he said so.

"Oh, the books I gave you are our old editions. We have the new ones on our open reference shelves," the librarian explained, "but they are all in use right now. Look at the cards in the file. You'll see we have a dozen 1940 copyrights and even one published in 1941. It came in yesterday." And Miss Simiz pointed with pride to the two volume set of the Wilson-Bruce NEUROLOGY that had just arrived from New York.

"Well, that's a different matter," the examiner exclaimed in a pleased tone, after he started to read the cards. "Cecil's MEDICINE, Ewing's NEOPLASTIC DISEASES, Bodansky's BIOCHEMISTRY OF DISEASE, Best & Taylor PHYSIOLOGICAL BASIS OF MEDICAL PRACTICE, Novak's GYNECOLOGICAL AND OBSTETRICAL PATHOLOGY, Steindler's ORTHOPEDIC OPERATIONS, and—flipping through the balance of the cards, "a lot more. All 1940 editions. Splendid . . . splendid. I could hardly believe when I saw those old editions that a hospital like St. Luke's would be lacking in anything so vital as up-to-date reference material. You know, I suppose, that the St. Luke's Medical Library is one of the largest in the country for a hospital of its size not affiliated with a university."

"It is fine to hear you say that. We try to make it not only of great help to all of the members of the hospital who



use it, but something of which the hospital may be proud, too."

The Library Committee of the hospital is appointed each year at the same time that the officers are appointed. Dr. Edwin F. Hirsch is the permanent head of the Library Committee. Since 1919 when he joined St. Luke's staff, and the only books in the hospital were kept in his laboratory, Dr. Hirsch has had an intensive interest in the medical library, and has contributed to its growth and development. Dr. Dorr and Dr. Lindquist are on the Library Committee this year, working also with Dr. Hirsch on the laboratory and autopsy committee.

To be sure that the new books purchased for the Medical Library are the right ones, Miss Simiz keeps a careful record of every request that is received in the library from the doctors for specific references in all fields. If there are twenty-five requests for a certain book



in one field, and only one or two requests in a whole year for another, the requests are so recorded. Then each year after an analysis of the requests has been tabulated, the books desired are listed from the greatest number of requests to the least number and purchased in that order.

The library committee has estimated that it would require about two hundred and fifty dollars to keep up new editions and add necessary new texts; at present only a part of this sum is available. Approximately one thousand dollars is spent annually on current journals, about half of which is paid by the administrative expense of the hospital and the balance by the Staff. In addition a large sum is needed for binding volumes of journals each year. This fund is furnished by the hospital.

Through the generosity of some of the doctors on the staff and other friends of St. Luke's, the Medical Library has grown steadily. We know that it will continue to grow, for the purpose and need of such a library is well-known to all. Interns must have

adequate references to review a whole field in which they are working; nurses must have access to necessary texts for study and preparation of term papers; doctors must have new texts and journals for research and case work.

To the doctors and friends who have given so generously through the years to the Medical Library, the entire hospital staff extends appreciation. To others who are particularly interested in books and realize the importance of the Medical Library in hospital work, we invite you to participate in helping us to build an even larger, better library for the Greater St. Luke's. There is lasting pleasure in donating new text books and journals to the Medical Library at St. Luke's; suitable book-plates with the donor's name are placed in books when they are received and in journals after they are bound.

Editor's note: For additional information about making donations to the Medical Library, write to Mr. Charles A. Wordell, Director of St. Luke's Hospital.

Around the Hospital

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MRS. JOHN W. GARY, *President Woman's
Board*

DR. SELIM W. MCARTHUR, *President Medi-
cal Staff*

CHARLES A. WORDELL, *Director*

Vol. 2 MAY, 1941 No. 5

Miss Anna Kathryn Stephens, who died in St. Luke's Hospital on March 26, had been a valued and loved member of the Social Service Department for fifteen years. A woman of broad sympathies and with a deep understanding of human problems, she was able to aid many of the patients in a solution of their difficulties, financial or social, never sparing herself, whatever the effort required, a fact well known to all the Hospital circle.

Another aspect of her life, less widely recognized here, was a pronounced literary ability, to the practice of which she formerly devoted much time, and which brought her many friends and admirers. For many years she had been a member of the Chicago Press Writers' Club, the oldest literary organization in Illinois, in which group her imaginative gift displayed in the fictional type of work, as well as her wide acquaintance with the best in literature, made her a leader.

In both circles of activity, she is sincerely mourned.

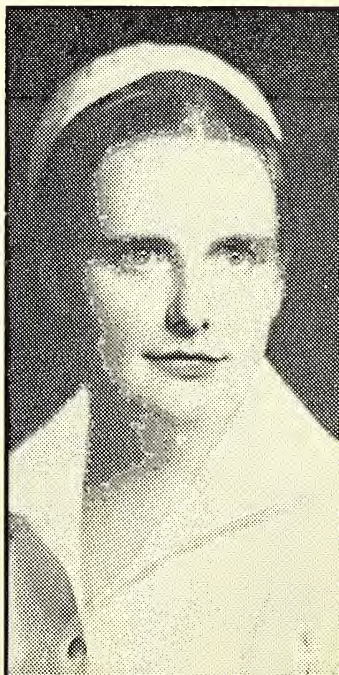
★

Dr. Abram Smith Kinne of West Chicago, Illinois, a member of St. Luke's Hospital intern staff, was married on April 5 in Bloomington Illinois, to Miss Janet Wagner of that city. Dr. and Mrs. Kinne left shortly after the ceremony on a short motor trip to Gatlinburg, Tennessee.

★

Miss Lois Elizabeth Ebinger, who graduated with highest honors from the School of Nursing in 1938, has been elected to Phi Beta Kappa, a national honorary scholastic fraternity. Miss Ebinger is the first St. Luke's nurse to receive this honor, and the second at the Department of Nursing Education of the University of Chicago. She received her Bachelor of Science degree from the University of Chicago in March.

Miss Ebinger states that she hopes to become a clinical teaching supervisor "when my experience catches up with my education." She has accepted a position as head nurse in Vanderbilt University Hospital and commenced work on May 1.



A blood serum and plasma bank has recently been established at St. Luke's Hospital. The purpose of the bank is to have serum and plasma available at all times for immediate use when required for treatment of emergency cases such as burns, shock, post-operative collapse, etc.

Blood serum or plasma can be used in at least half the cases for which whole blood is now given. It is more economical than the whole blood. The transfusion of serum or plasma may be a life saving procedure when immediately available in the conditions mentioned above.

This is a new development intended to keep service at St. Luke's abreast of the latest advances in scientific medicine.



Do you know that flowers may be ordered through the Shop for patients in the Hospital?



Members of the St. Luke's family will be interested in the marriage of Miss Helen Jane Brinker to Dr. John Bronson Case, which took place on Saturday, April 12, at 8:30 P.M., in the Bond Chapel of the University of Chicago. Dr. Case graduated from Northwestern University School of Medicine in 1938 and was an intern and a resident of St. Luke's Hospital for several years after his graduation. He is at present practicing medicine in Chicago.



Do you know that the Shop delivers baskets of fruit to patients in the Hospital for \$2.50 and up?



Dr. Warren K. Simmons has been called to active duty by the United States Army where he will continue his

work in internal medicine. He is at the Station Hospital, Fort Bliss, Texas.



Nurses Residence

(Continued from page 3)

house all residents and interns, furnish additional space for medical services and research laboratories, and coordinate duplicated departments.

The Hospital's free work also needs to be extended if St. Luke's is to maintain its high educational standard. The first requirement for such extension is a new Out-Patient Building.

Several floors of Main Building should be remodeled to provide private accommodations at reasonable cost, and we must provide more ward services for those patients who cannot afford to pay for private accommodations.

The Hospital also needs additional endowment for free beds for those persons who should have hospital care and cannot pay anything for it. And of vital importance is additional endowment to operate the new buildings proposed in the program of development.

With a distinguished Medical Staff that draws patients from all sections of the country, there is every reason to expect that St. Luke's one day will become the Medical Center of the Middle West. When all of our "dreams" are realized, St. Luke's will be able to care for many additional out-patients, free patients, and part-pay patients. St. Luke's development program will enable it to make more contributions to medical research, train more nurses and interns, and offer more opportunities to resident doctors who wish to specialize.

All of these things considered, a dollar given to St. Luke's program of development is a valuable investment in the well-being of mankind.

All current books, fiction or non-fiction, may be ordered through St. Luke's Hospital Shop.

★

Grateful acknowledgment is made to Dr. Louis E. Schmidt, who liberally donated one hundred and twenty-three books to the Children's Department. Thirty-nine of these books have been allocated to the Children's Library and eighty-four to Miss Bonfield for school work.

★

The following is the program for the graduation week for the School of Nursing:

Friday, May 16—Junior Senior Prom, Congress Hotel

Sunday, May 18—Baccalaureate Service, Grace Church.

Thursday, May 22—Homecoming Day

Friday, May 23—Graduating Exercises, St. James Church, and Reception later at St. Luke's Hospital

Saturday, May 24—Alumnae Banquet, Blackstone Hotel.

★

Mrs. Keith Grimson has resigned as Clinic Dietician and will be replaced by Miss Doris Grand, who has been dietician at the Smith Building for the past two years. Miss Julia Thompson of Virginia will replace Miss Grand as Smith Dietician.

★

The News joins his many friends in offering deepest sympathy to Dr. Burton R. Bancroft in the recent death of his wife.

★

St. Luke's Shop carries men's pajamas and robes.

UNIFORM TEA HELD FOR NURSING GRADUATES ON APRIL 23, AT THE HOSPITAL





INTERNS IN CLASS, LISTENING TO A LECTURE FROM A STAFF PHYSICIAN.

St. Luke's NEWS



June 1941

Page 2

Number 6

Plans for Nurses' Home Revised

REVISED plans for St. Luke's proposed new Nurses' Home, incorporating the Educational Department in the new building, have been approved by the Building Committee, Chauncey Borland, Chairman, announced last week.

Under the chairmanship of Sterling Morton, the Campaign Committee is doubling its efforts to boost the \$401,000 already pledged to \$650,000 needed before ground will be broken for construction.

The new plans call for a library, lecture halls, directress' offices and other educational facilities on the first floor. These facilities will vacate two more much-needed floors in Main Building for patient use. Also included in the revised plans are additional rooms that are available for naming. The complete list of suggestions for gifts include:

The entire Nurses' Home can be named for \$250,000.

2nd, 3rd and 4th floors can be named for \$100,000 each.

5th, 6th floors can be named for \$60,000 each.

7th and 8th floors can be named for \$50,000 each.

Living Room can be named for \$25,000.

Foyer can be named for \$10,000.

Sitting Room can be named for \$10,000.

Reception Rooms (3) can be named for \$3,000 each.

Party Room can be named for \$4,000.

Students' Library can be named for \$10,000.

Science Laboratory can be named for \$7,500.

Dietetic Laboratory can be named for \$7,500.

Lecture Rooms (3) can be named for \$6,000 each.

Directress' Suites (2) can be named for \$6,000 each.

Instructors' Suites (3) can be named for \$3,000 each.

Graduate Nurses' Rooms (16) can be named for \$2,500 each.

Student Nurses' Rooms (271) can be named for \$2,000 each.

Garden can be named for \$5,000.

Floor Lounges (7) can be named for \$5,000 each.

To date several of these items have been "sold". Arrangements have been made for naming the Living Room, a Directress' Suite, the First Floor, and the Eighth Floor.

ARCHITECT'S DRAWING OF THE REVISED PLANS FOR THE NURSES' HOME.



In Which the Comptroller Tells All

BY FREDERICK T. MUNCIE, CPA

Comptroller, St. Luke's Hospital

DURING the primitive stages when hospitals occupied oversized residential houses, it was necessary to devote but very little thought to "business" methods, for there was very little business to think about. Hospitals in those days were usually conducted by a doctor for the benefit of his private patients, and were presided over by a practical nurse, who aside from giving bedside attention to the patients, assumed much of the responsibility for "running" the place.

Comptrollers were unheard of then, and had the term been mentioned, quite likely it would have been taken for some new and rare disease or plague to be inflicted upon an unguarded and unsuspecting people. There are some, even now, who might rightfully hold to those contentions.

It was no "job" at all for one person to attend to all the details connected with such an institution, if such they might be called. With a capacity of one to six or eight beds, there was no problem of budgeting to make "ends meet" as it were. The doctor or proprietor, or whatever he was called, usually provided all necessary funds to meet expenses and in turn collected, in one fee, for the services the patient had received, so—there was no need for a "credit and collection" department. Since there was but one charge made against the patient for his care, it was an easy and simple procedure for the doctor to enter one amount after the name of the patient in a little black book which he carried in his medicine case. So, there

was no need for a "bookkeeping" or "accounting" department.

Since rent was practically nothing in those days and since the doctor was very frequently compelled to accept his fee in coal, wood, home-canned fruits and vegetables and other like commodities, there was no problem in finances,—so,—no financier was necessary. If there weren't enough patients to keep the place open—it was simply closed. As "costs" were unknown and unheard of, there was no "cost accounting" or "cost accountants."

But—with the rapid march of time, hospitals grew up. And with this "growing up" process, came advancement and improvement all along the line. Hospital operations became diversified and complex—the care and treatment of patients was reduced to an art and a science. Hospitals outgrew their swaddling clothes and took up residence in large, especially designed and constructed buildings. The old "institution" and its primitive methods passed out together with hoop-skirts, bustles and mustache cups. Similar to practically all American institutions, hospitals have become decidedly modern.

Humanity having acquired and developed so many new-fangled diseases, the old general practitioner gave way to the specialist, until now almost every disease has its specialist. Speaking of diseases and specialists—when hospitals—like commercial enterprises—began to grow and develop, they developed complexities in both organization and in management. Some of these complexi-

ties were sure-enough rare diseases that required specialists. When hospitals grew to the stage where the patients of several doctors were admitted and cared for, the job of keeping tab on all the expenditures incidental therewith was just too much for the "one-man-management" and the institution became afflicted with an individual termed a "bookkeeper."

At about this stage of affairs, the dual-fee-systems were probably inaugurated—one fee for the doctor—one fee for the hospital. The doctor collected his fee if he was lucky and so did the hospital. This required keeping a patient's account, and it is known today as "patients' accounts receivable." In those days it consisted of entering charge items on one side of a ledger page. If the patient paid all the charges, the account was "crossed off." If the patient didn't pay, it was crossed off anyhow.

For those expenditures that involved the purchase of supplies for the hospital the bookkeeper entered the items on the

opposite side of the ledger and likewise "crossed off" the account when—and if—it was paid. This was about the extent of bookkeeping methods when they were first introduced, and in many respects and in some instances they differ very little today. But we make progress rapidly—and the old order passeth. Conforming to a trend of the times when high-sounding terms were applied to various professions, such as Pediatrician, Obstetricians, Dietician, Neurologist, Pathologist, etc., the lowly bookkeeper emerged a full-blown Comptroller.

It is a far cry from the days of the early hospital up to the present day institution housing not six or eight patients, but hundreds and even thousands of patients each day. Such an institution is no simple organization, therefore no simple business methods or procedures will suffice to properly control all the activities that go on within the doors of our modern hospitals.

If we select our own honored St. Luke's as an example it should be readily

MR. MUNCIE (STANDING) IN HIS DEPARTMENT.



manifest to even the most casual observer, that the financial transactions involving as much as a million dollars a year in income and a like amount in out-go would require no small amount of detail to properly handle, classify and account. To the uninitiated and uninformed the mere mention of figures of such proportions might seem staggering. During the year 1940, just closed, 13,275 patients or about 36 per each eight hour day—approximately one every twelve minutes entered the hospital for in-bed care. And this figure does not include the thousands, known as ambulatory patients, that came—were treated—and went home during the course of the year.

First things coming first—it required an admitting staff of nine people working in relays every twenty-four hour period to arrange accommodations for and admit those patients. Supplementing the admitting staff, there was a corps of six page boys who saw to it that each patient was escorted to his room and other comforts arranged.

Each of these patients required an individual account. Since they were spending good money for their care, it was essential to have them correct and right up to the minute. In keeping pace with modern developments, St. Luke's hospital employs machine book-keeping for its patients' accounts. By this means one operator sometimes posts as many as 1200 items in a day of eight hours. No hand written method would handle such a volume. When the day operator leaves, a "night auditor" puts in appearance, audits and balances the accounts and proves them to a control. This provides a maximum degree of accuracy and affords the assurance that at any time should the patient desire it, he can know the balance he owes and verify the items as well.

As was stated, the income from pa-

tients during 1940 was equivalent to approximately \$1,050,000. Did you ever attempt to count to a million? If you did, you must certainly realize that it is no minor task to collect and handle such a sum. Therefore a "head cashier" and an assistant are on hand daily for eight hours to collect and deposit this money. Patients may pay their accounts any hour of the day or night—to any of the clerks on desk duty who are provided with registered receipt books that are turned into the cashier the following morning.

In the transaction of such a sizeable volume of business, it has, no doubt, occurred to you that there must be some loss from uncollectible accounts. Well there is. Over a period of eleven years, the loss from that source has averaged about one and seven-eighths cents out of each dollar charged to the accounts of patients. One may wonder how it is possible to keep the loss within such a margin. Eternal vigilance over each account, from the time it begins until it is finally disposed of, is the answer.

This is where the "credit and collection" department functions. Much the same as a credit manager of a commercial institution, every patient's history passes the scrutinizing eye of one versed in credits, and is immediately classified as good pay—doubtful or slow—or poor pay and poor risk. Following this determination, each account is then observed every seventh day and appropriate action taken as each individual case may warrant.

Of course, there are patients who do not pay their account in full upon leaving the hospital. A carefully planned follow-up method is pursued by the "collection correspondent" and her assistant. When this procedure fails to collect the account other methods, slightly more drastic, are employed.

So far we have dealt only with the in-

come from patients. In caring for the 13,275 patients admitted in 1940, the hospital expended slightly more than \$500,000 in salaries and wages; slightly more than \$180,000 for food stuffs; approximately \$65,000 for general supplies; almost \$30,000 for drugs and medicines; and slightly more than \$100,000 in maintenance and heating of Plant. And so on until a total of more than a million is spent.

It should be apparent to the most casual observer that sums of such proportions can't be expended haphazardly. A system of guarding the expenditure must be as thorough and as methodical as the system that collects the funds in the first place. Each dollar of expenditure must be allocated to its proper niche. Leaks must be guarded against and overestimated projects whittled down to a standard of measurement. We call this standard the "budget."

Many of us, no doubt, think that we'd like to have a million dollars a year to spend as our fancy directed. But the responsibility of having to account for it, minutely, at the end of the year, would be a formidable task that most would shun.

The Chief Accountant and his assistant, perform this task, with many others, with apparent ease and simplicity. First of all, there are 39 main divisions or accounts. If we split a million dollars into 39 parts—about \$25,641 per part—well—that looks entirely different. Each of these 39 main divisions, have a total of 221 subdivisions. If \$25,641 is split 221 ways it equals about \$116 each way—a sum that most of us feel we might handle with ease. So it is, bit by bit, the myriad items of expenses are picked apart and allocated, each plugged nickel to its own cubby hole. Month by month they are measured up against the predetermined (budget) amount—and we call it

"budgetary control."

During the year 1940 there were 382,000 meals served to patients, and another 565,500 meals served to nurses, doctors and personnel. For the food supplies that went into all these meals the hospital expended almost \$182,000. A lot of groceries can be had for that sum. To properly safeguard against excessive cost of meals a "food cost accounting" is part of the general scheme of things.

Food costs are accumulated and tabulated daily and the cost per meal is noted and compared with predetermined (budget) estimate.

Modern enterprises of any sort are not guided by blind flying in these days. Those persons charged with the responsibility of successfully managing an institution of the magnitude of St. Luke's want to know which way the wind is blowing, when planning ahead. They want to know daily whether the occupancy trend is toward higher or lower levels—whether costs per unit (patient day) is increasing, decreasing or static. They want to feel the pulse of the public and sense its inclination and to know whether it favors the more select or less expensive accommodations. The desire to know what departments show improvement and which fail to improve—whether the income per unit is keeping up with the rise in cost, etc., etc. All these things are vital to successful management, so a statistical unit is an essential part of the Comptroller's department. It provides the weather vane which indicates fair or foul weather ahead.

The "Payroll and Paymasters" division is one little detail which must not be overlooked. It is, in fact, quite difficult to overlook. Twice a month, each of the 580 salaried personnel are paid by check. On the day before

(Continued on page 15)

Nursing Class Graduates

THURSDAY, May 22nd, was the beginning of Homecoming for graduates of St. Luke's Hospital. They began streaming into the Hospital early Thursday morning and were on hand for the Demonstrations in New Nursing Technics at 10 A.M. From 11:30 A.M. until 2 P.M. there were tours made in the hospital—all of the alumnae members looking for familiar "landmarks" and exclaiming over improvements and additions.

At 2 P.M. they gathered on Main 12 to hear Mrs. John W. Gary, President of the Woman's Board and Chairman of the Nursing Council, speak on "The Greater St. Luke's and Nursing Education Plans for the Greater St. Luke's."

Following Mrs. Gary's talk, Miss Edna T. Plambeck, Director of the Department of Nursing, Wayne University, Detroit, Michigan, spoke on "Curriculum Construction."

The final speaker was Mrs. Ada R. Crocker, Director of Cook County School of Nursing and Director of Nursing Service, who chose for her subject, "Administrative Problems."

Following the speakers, the class of 1941 presented the traditional banner to the oncoming senior class, and the graduates then presented the School of Nursing with a bronze plaque of the Nightingale pledge. The group then assembled in the Chapel for a short religious service. Later the annual Homecoming Tea was served in the Helen Shedd Reed Room.

Graduation exercises were held in St. James Church at 8 P.M. on Friday, May 23rd. After an address by the Rt. Rev. Wallace E. Conkling, Bishop of the Episcopal Diocese of Chicago,

Charles H. Schweppe, President of St. Luke's, awarded the diplomas. The following seven honor awards were presented by Miss Madeleine McConnell, Director of the School of Nursing:

THE CHARLES H. SCHWEPPE AWARD—offered to the most outstanding student in psychiatric nursing—**MISS STELLA KONECKO.**

THE MRS. CHARLES H. MORSE AWARD—offered to the student who ranks as the most outstanding "all around" nurse—**MISS SYLVIA LUKONEN.**

ANONYMOUS AWARD—offered to student who demonstrates excellence in bedside nursing.—**MISS ELIZABETH SAVIO.**

WOMAN'S BOARD OF ST. LUKE'S HOSPITAL AWARD—offered to student showing outstanding ability as operating room nurse—**MISS WANDA WATSON.**

WOMAN'S BOARD OF ST. LUKE'S HOSPITAL AWARD—offered to most outstanding student in pediatric nursing—**MISS MARION SCHEMP.**

WOMAN'S BOARD OF ST. LUKE'S HOSPITAL AWARD—offered to student showing most outstanding ability in obstetrics—**MISS DARLENE DOLVA.**

THE HARRIETT FULMER AWARD—given to student with highest scholastic standing—**MISS MARY STYPULOSKI.**

Following the graduation ceremony, students, parents, friends and officials of the hospital attended a reception held in the Helen Shedd Reed Room at St. Luke's.

The perfect ending to this week of events was the Alumnae Dinner held in the Crystal Room of the Blackstone Hotel.



OFF WITH THE OLD UNIFORM.



ON WITH THE NEW.

Her



THE DIPLOMA IS THE
HARM

Day



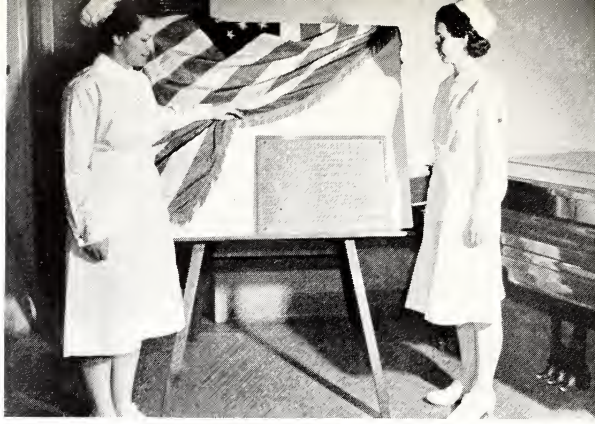
MBOL OF SUCCESS AND
WORK.



FAMILIES AND FRIENDS ARRIVE FOR THE GREAT
OCCASION.

LINING UP FOR THE GRADUATION PROCESSION,
THE JUNIOR CLASS IN THE LEAD.





PRESENTATION OF THE NIGHTINGALE PLEDGE

1941 Graduating Class

Aiduks, Ruth
 Badger, Amy Jean
 Basinger, Patricia
 Blaha, Elaine
 Bowman, Betty Mae
 Brice, Alice Anne
 Cannon, Ruth Alice
 Carlson, Dorothy
 Chamberlin,
 Elisabeth
 Cochran, Mary Ellen
 Coplen, Kathleen
 Davis, Kathryn
 Davis, Margaret
 Dishneau, Norma
 Dolva, Darlene
 Dungey, Peggy M.
 Elliott, Vera
 England, Arlene
 Erickson, Marion
 Fuller, Doris Jean
 Greene, Patricia
 Greenman, Claire
 Hathaway, Lucille
 Holmes, Eleanor

Idstrom, Catherine
 Kelm, June Marie
 Knox, Nathalia
 Konecko, Stella
 Kulin, Martha
 Leman, Dorothy
 Lewis, Dorothy J.
 Lukonen, Sylvia
 Mathieu, Joyce
 McBeth, Mary
 Florence
 Messner, Zella
 Miller, Marion S.
 Nelson, Grace
 Neubauer, Evelyne R.
 Neubauer,
 Virginia M.
 Olson, Evelyn
 Parish, Lora May
 Peterson, Dorothy
 Pishotta, Joyce R.
 Pittenger, Barbara
 Prickett, Eileen
 Quies, Genevieve
 Ranney, Lucy

Reardon, Mary
 Catherine
 Ribbeck, Janet
 Savio, Betty
 Schempp, Marion
 Scott, Ellen
 Sharynn, Bernice
 Shaw, Vivian Lou
 Shearer, Elizabeth
 Slapnicar, Bernice
 Small, Evelyn J.
 Smith, Frances
 Smythe, Barbara
 Snip, LaVerne
 Stein, Adele Marie
 Stypuloski, Mary
 Swanson, Hilda A.
 Sward, Sylvia
 Wagner, Mabel
 Watson, Wanda M.
 Wells, Wilma M.
 Wilkinson, Mary
 Williamson, Marie
 Wise, Ruth
 Zahn, Irmgard

CHARLES A. WORDELL, DIRECTOR OF ST. LUKE'S, CONGRATULATES THE HONOR STUDENTS.



St. Luke's Hospital Pharmacy

WILLIAM H. ZABEL, R.Ph.G.

FROM ancient times man sought and employed remedial agents to cure or relieve the diseases and plagues that befell him. Thus, pharmacy dates back to biblical times, and together with medicine, was long controlled by the priesthood. The separation of the practice of pharmacy from that of medicine was not completed, however, until the 18th century.

The art and practice of pharmacy continued its historic development and expansion through the last two centuries; and today, it remains more than ever, the primary tool for the physician in combating human ailments.

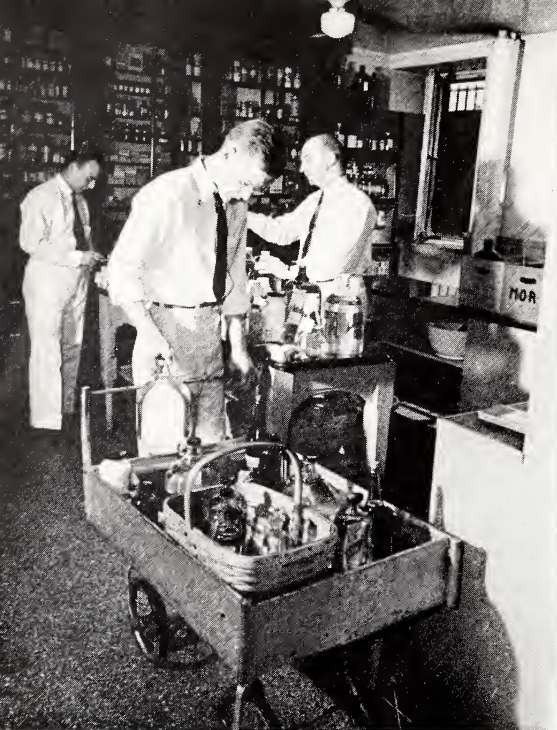
It is little wonder, then, that at St. Luke's Hospital, we find the pharmacy one of its oldest and best established departments. The pharmacy is in a central location, on the main floor of the original hospital building on Indiana Avenue. Upon entering the department a degree of amazement can clearly be seen on the countenance of the visitor, especially so amongst the younger generation. The latter, who is so accustomed to the commercial drug store, with its array of non-pharmaceutical, feels a bit doubtful as to whether he is in the right department, or perhaps that the pharmacy sign at the entrance may have been misplaced. For, alack, he finds none of the commercial side line. Instead, he surveys the endless rows of shelves filled with neatly arranged bottles of various size and content. The cleanliness and neatness of the rooms inspires a refreshed feeling.

In the prescription compounding room a display of pharmaceutical tools, mortars and pestles, graduates, fine balances, scales, spatulas, flasks, bottles, etc., all in proper places.

Surrounding the prescription counter are sections of shelves filled with bottles of tablets and pills, chemicals and liquids. Along the walls are section cases containing thousands of pharmaceutical preparations of every description. Another section is lined with liter flasks of various intravenous fluids, all freshly prepared within the past 24 hours. In the extreme corner is a large, new biological refrigerator. Here are stored biologicals of every description; anti-toxins, vaccines, serums, blood plasma, blood serum, and various pharmaceuticals that must be kept at a refrigerated degree to retain their potency and freshness. Aligning the walls of the manufacturing rooms are long steel cabinets, in which are innumerable bottles of chemicals. The remainder of the rooms have various cases, drawers and shelves. In and on these, every sort of tablet, powder, chemical and pharmaceutical preparation that are used, are stocked. From these thousands of different chemicals, drugs and pharmaceuticals it is possible to fill practically any conceivable prescription or drug order.

Also stored in orderly fashion are hundreds of bottles from pints to ten gallons, of preparations manufactured in the department.

St. Luke's differs from many hos-



USING THIS CART, MEDICAL SUPPLIES ARE DELIVERED TO THE FLOOR, WARD, LABORATORY AND OPERATING ROOMS' STOCK SUPPLIES.

pitals in that it does not buy all its medical supplies already prepared. The drugs and chemical elements are purchased and the preparations are made in the pharmacy. Desire for exact preparation and economy dictate this important policy.

Located here, also, are large drums of antiseptics, lotions, oils, alcohol, glycerin, liquid soap, etc., from which these items are dispensed in smaller units that are sent to the various floors.

As one gazes about these rooms, the mystery of these thousands of drugs and solutions arouses a feeling of amazement and curiosity about these agents of health, yet the romantic and historic development of each of these drugs is a wonderful story in itself and merely accentuates the progress of man in his endless search and quest of knowledge.

The question arises, how are the pa-

tients, floors and various departments supplied with these drugs?

Every floor has a large medicine cabinet, narcotic drawer, dressing room standards and refrigerator, in and upon which all drugs are kept. A standard supply of the more generally used drugs, including emergency medicaments, are available on every floor and in the operating rooms. Each morning, this supply is checked by the nursing staff, and empty containers, along with prescriptions and orders for special medicines other than in the general supply, are sent to the pharmacy to be filled. In this manner there is available for the physician and nurse, without delay, any drug needed for the treatment of the patient.

The general work plan in the pharmacy is as follows: The morning hours are spent filling the floor and ward, laboratory and operating rooms' stock supply of medicines and drugs, compounding patients' prescriptions and returning them without delay. A considerable part of the morning is also given to filling clinic prescriptions.

In the afternoon the pharmacists are busily engaged in filling clinic prescriptions, special patient orders and prescriptions, replacing replenished stock and manufacturing pharmaceutical preparations and various intravenous and parenteral fluids.

Added to this is the maintenance of records of daily narcotic, alcohol and drug supplies; of charges and purchases, and many other statistical functions.

The immensity of the amount of work can be observed from the following data:

1. Over 1,000 orders from the floors, operating rooms, laboratory, etc., are filled daily.
2. An average of over 3,000 clinic prescriptions are filled monthly.
3. 1,300 one-liter flasks of intravenous dextrose solutions, of vari-

ous strengths, are manufactured each month.

4. Hundreds of sterile parenteral preparations are prepared monthly.
5. Hundreds of standard pharmaceutical preparations are manufactured each month.

In supplying this service, the pharmacy department functions under the following basic principles:

1. To render the patient rapid and the best pharmaceutical service.
2. To compound and dispense the physicians' prescriptions and orders with the best pharmaceutical knowledge and care.
3. To keep a constant survey of all new drug preparations and medications.
4. To maintain a full interest in educational research developments in pharmacy.

5. To maintain a cooperative spirit in relationship with the medical and nursing professions.

More intensive articles will be written about the technique of interesting pharmaceutical problems, such as are involved in narcotic records and control, preparation of intravenous fluids. Another article can tell the story of dramatic changes in remedial agents from the time-used galenicals (medicines prepared from crude drugs) to the newer remedies, including hormones, vitamins, and synthetic chemicals. These are historical facts, rich with romantic explorations of research and investigation.

We take leave at this point of St. Luke's Hospital Pharmacy Department where the synthetics of tomorrow challenge the galenicals of yester-year for supremacy in their aid to help mankind conquer disease.

"BILL" ZABEL IS A BELOVED ST. LUKE'S TRADITION WITH HIS MORE THAN THIRTY YEARS OF SERVICE. HE IS SHOWN HERE (AT THE LEFT) WORKING WITH AN ASSISTANT IN THE PHARMACY.



Around the Hospital

St. Luke's News

*Devoted to the welfare of
St. Luke's Hospital*

Information for the friends of the Hospital
regarding its service, personnel, affairs,
accomplishments, and aspirations.

Published each month by St. Luke's Hospital
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Editor MARION B. PIERCE

ADVISORY COMMITTEE

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CHARLES A. WORDELL, *Director*

Vol. 2 JUNE, 1941 No. 6

Dr. David A. McClusky has accepted a position practicing internal medicine at Wenatchee Valley Clinic, Wenatchee, Washington. Dr. McClusky has been our Senior Medical Resident during the past year in charge of the Medical Clinics and Hospital Health Service.

Dr. A. D. Haug and Dr. L. M. Mares, both former St. Luke's internes, are associated with the Wenatchee Valley Clinic at the present time.

★

Dr. Gordon Snider, first year intern, is ill in the hospital under the care of Dr. Chester Coggeshall. This is to let him know that we all wish him a speedy recovery.

★

Dr. Harry G. McGavran recently resigned his position as Resident in Urology to accept a place as assistant

to Dr. Cole of Detroit, Michigan, who is a Diplomate of the American Board of Urology. Mrs. McGavran, who was Bernice Boise, a St. Luke's nurse, will follow Dr. McGavran in a month or two.

★

Georgette Arsenault held "court" at St. Luke's Hospital a few weeks ago. A steady stream of visitors poured into Main 14 where the 18-year-old girl has been a patient since January 24th of this year. Photographers, reporters, friends crowded the ward for several hours. Among many other honors, Georgette received these:

She was graduated from St. Francis de Sales High School in a private ceremony in her ward. An outstanding honor student of the school, her diploma was presented by Rev. John Webster, pastor of St. Francis de Sales church.

She received a telegram from Dr. William H. Johnson, Superintendent of Schools, congratulating her on her graduation.

A five-dollar bill from the Mothers' Club of Sabin School for Cripples was presented by Mrs. Carrie Baum, President, in recognition of outstanding courage.

She received a book entitled "Patsy Breaks into Advertising" from the author, Mrs. Andrew McNally of St. Luke's Womens' Auxiliary.

A radio program was dedicated to her by Uncle Harry of radio station WGN.

On Saturday, April 19, Miss Miriam Mayfield was married to Dr. Edwin C. Graf, a member of St. Luke's intern staff. The ceremony took place in the Park View Lutheran Church, the Rev. Martin E. Fretheim officiating.

★



Miss Jean Orr, of Thornburg, Iowa, and a graduate of St. Luke's Hospital in October, 1940, is now a stewardess with United Air Lines. Miss Orr has completed the

intensive training course required by the air line and will be flying west from Chicago to Omaha, Denver, Cheyenne and other points.

★

The following members of St. Luke's Staff have been elected to the Chicago Surgical Society: H. I. Meyer, E. Lee Strohl, Foster L. McMillan, and Graham Kernwein.

★

The portrait shown on the front cover was painted by Marshall H. Gooch and presented to St. Luke's School of Nursing by the Misses Maud and Hettie Gooch, during Homecoming festivities on Thursday, May 22nd.

Miss Fulmer graduated from St. Luke's School of Nursing in 1895 and in 1896 she founded The Alumnae Association, became its first president, and subsequently was reelected and served in that capacity for seventeen years.

She organized and became the first president of the Illinois State Nurses

Association in 1901.

In 1908, Miss Fulmer called the first conference of Public Health Nursing in Chicago. Delegates came from all parts of the country.

Our famous graduate is known best, perhaps, for her work in the Visiting Nurse Association. After two years as a staff nurse in Jane Addams Hull House District, Miss Fulmer was appointed Superintendent of the Chicago Visiting Nurse Association. She held this position for thirteen years.

Comptroller

(Continued from page 6)

checks are distributed to the personnel, payrolls from thirty or more departments arrive at the desk of the Chief Accountant, who in one day's time must verify salaries, compute extensions and have checks prepared so that, beginning with the night employees at 8:30 A.M. on pay day, and at intervals of about fifteen minutes from noon until 3:00 o'clock, every employe can have his check.

Aside from the functional activities outlined in preceding paragraphs, there is a miscellany of detail which makes the daily life in the Comptroller's department an interesting one. Patients or their relatives must be visited or interviewed and their troubles adjusted. Matters of policy and of practice are constantly up for decision. Statements and reports of the various activities of the Hospital must be prepared on schedule to be presented at the different meetings of officials and committees.

And, this, dear reader, is a sketchy picture of the interesting life of the Comptroller's Department of St. Luke's Hospital.



SCENE IN ST. LUKE'S PHARMACY.

St. Luke's NEWS

*Charity
in a
Democracy*

*by
Dr. Selim W. McArthur*

August 1941



NURSES IN DEFENSE

Charity in a Democracy

BY DR. SELIM W. McARTHUR

President, Medical Staff

RARE is the man these days who at some time or other is not asked to dig down in his pocket for some worthy cause or charity. And, of course, in a democracy that is as it should be. It is one of the requisites of good citizenship. But, philanthropists tell us there is much in knowing how to give wisely. They say it's an art.

THREE TYPES OF DONATIONS

There are really three types of donations. There are those which are largely straight charity, such as the Community Fund, Salvation Army, and various funds for the destitute; and it is probable that few who give to this great and worthy group ever expect to derive any material benefit from their gift.

There are donations made to projects—most worthy, but in a strict sense not essential charities—to art, music, museums, parks, fountains, and various civic improvements. This group is not so clearly impersonal and altruistic, as the donor frequently derives pleasure, education and satisfaction from the subsequent personal utilization of the project his gift made possible.

A third group of donations is made for strictly educational purposes—to schools, colleges and universities. Many of these are made from a sense of indebtedness for benefits received by the donor or his children, or a sense of duty, pride and loyalty to the old school. Of course, some are made with the sincere, altruistic hope that benefits may come to others—that were never possible for the giver.

Now, where does the gift to a hospital stand? This question propounds a most interesting paradox. Undoubtedly, every dollar given to a hospital is given with the clearest idea of straight altruistic charity in heart. Yet, here is the one project made possible by his gift from which it will be almost impossible for the donor not to become the personal recipient of benefits. In the vast majority of cases, these benefits will be of a value far in excess of the gift. Why? The answer is simple. In this day and age, most of us are born in a hospital—few, if any, escape one or more sojourns in a hospital during life's journey (this should include likewise members of one's family)—and many who are fortunate end this journey in these havens where pain and suffering can best be avoided.

There is another angle to be considered. Everyone knows that a hospital is a place to go for care when seriously sick or injured. Everyone expects to receive at the hospital the very best care that modern science affords to assure rapid recovery from sickness and injury.

TRAINING THOSE WHO CARE FOR SICK

This is true and reasonable and is, of course, the primary function of a hospital. How many people ever stop to think of the second almost equally great function and duty of every large hospital; namely, the training of those who care for the sick—doctors, nurses, students, technicians of all kinds. A large

(Continued on page 12)

St. Luke's Nurses Answer Call to Service

BY MADELEINE McCONNELL, R. N.

Director, School of Nursing

QUIETLY, and with high purpose, professional nurses are doing their share in our National Defense Program. Every day St. Luke's Hospital Nursing Office receives flashes from its graduates, from far flung stations throughout the country and from across the seas: "We are standing by—We are ready—We will do our duty." And they will, because they are educated, disciplined men.

Here are some of these flashes from St. Luke's nurses. Around Christmas time, from England, one of our

Alumnae, who long since from the standpoint of age and service had earned rest and quiet, wrote: "We are all working and glad to help. Why not? Just the other night the surgeon in our town kept right on operating during an air raid though news came that his house had been wrecked and all his family destroyed!" She goes on, "I am so thankful for St. Luke's and our School. You, where there are no bombings, will help to keep things steady and maintain education as it should be."

Several of our nurses have stepped out of good civilian positions to accept Army appointments. One said: "I have no one dependant on me so think I should go." She landed in a military camp, where many facilities were lacking, in time to help with a "flu" epidemic, and now writes: "I signed up for a year but now they have asked me to sign for two more—service anywhere. I haven't said 'Yes' just yet, but I know I will."

Another whose family roots are in Finland gave up an offer for a supervisory position—because, "I wanted to go," and is now at a nearby camp, where thousands of soliders are trained for short periods and then go on to other camps.

A young graduate joins the Harvard Red Cross Unit for service in England, stands by waiting sailing orders—the postman brings a letter from her with



MADELEINE McCONNELL

(Continued on page 13)

St. Luke's in the Horse and Buggy Days: I

BY THE REV. CLINTON LOCKE, FOUNDER

(Written in 1895)

WHEN I look at the noble pile of buildings which compose St. Luke's Hospital, I feel like the Sultan in "Aladdin's Lamp," who awoke and looked from his window, and lo! right before him, where there ever had been a vacant lot, stood a splendid palace. It often seems impossible that it should be real, when I contrast it with the little story-and-a-half structure in which this great work was begun.

I had for some years been greatly exercised over the hospital accommodations of this city. The Sisters of Mercy had a good pay hospital, and there was a small free hospital, very dirty and very meagerly supplied. As Rector of Grace Church, I was called to minister to many sick poor people, and the crying need of some clean, free Christian place where they could be cared for, forced itself upon my mind with resistless power.

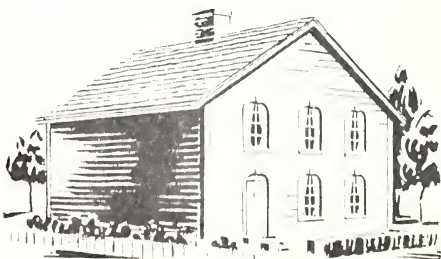
I preached upon it one Sunday morning and after the service Mrs. Locke gathered some of the ladies of the Camp

Douglas Aid Society in the rectory to speak with me. This society was composed of ladies of Grace Church, who were banded together for the purpose of supplying the sick soldiers of Douglas Camp with much needed comforts.

They had done a blessed work—Mrs. Locke, though never an officer, being the motor power—but their services were no longer needed in that direction. These ladies said: "Your sermon touched us very much. Why cannot we start a little hospital? We have long worked together for the hospital cause. Can you not lead us in the foundation of a Church Hospital?" "Yes," I said, without a moment's hesitation.

So, on the 18th day of February, 1864, a meeting of those interested was held at the house of Mrs. B. F. Hadduck, always a warm friend of the cause. At this meeting it was resolved to establish a hospital to be called ST. LUKE'S. A simple constitution was framed, and the following officers were elected: Rev. Clinton Locke, president; Mrs. W. Franklin and Mrs. H. W. Ensedale, vice-presidents; Mrs. B. F. Hadduck, treasurer; Mrs. Aaron Haven, secretary; Dr. Walter Hay, a well-known Chicago physician, who had shown the greatest interest in the enterprise, was elected physician. Three of these first six officers now (April 1895) rest from their labors in the world beyond the grave.

The first thing was to find a house in



BIRTHPLACE OF ST. LUKE'S HOSPITAL

which to start, and to get together the money for the rent and furnishing. We found a small wooden house on State Street near Eldridge Court, where by crowding, we could put up seven beds. It was a pleasant little place with grass and flowers and one or two poplar trees.

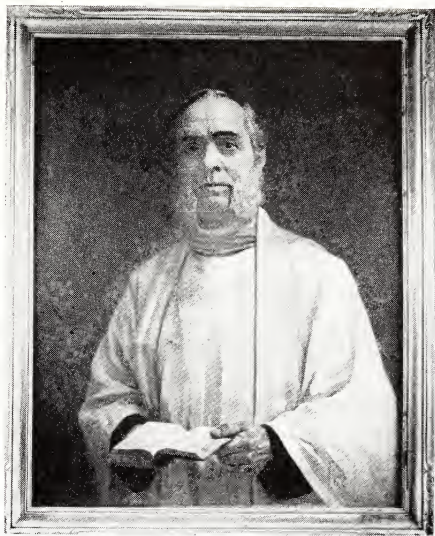
The Camp Douglas Aid Society had now been merged into St. Luke's Aid Society, and the members now went to work with a will and soon had \$1,500 for support and the little building was comfortably furnished. A building fund was immediately started and the first contribution, \$126, was the outcome of a little fair held by two young girls of the parish.

The enterprise thus far was entirely confined to Grace Church. It was not looked upon as very feasible by the Church in general, and the rector of St. James, a very dear friend of mine, begged me not to go into it. "We tried it on the North Side," he said. "We also took a house and furnished it, but there is not interest enough in the Church to keep up such a thing. We had to shut up and so will you."

Bishop Whitehouse also was very discouraging. I was, however, young, determined, earnest, full of hope and faith, and I resolved to go on. I remember one or two curious incidents connected with our first hospital.

Our first patient was a man with delirium tremens. He was left unguarded for a moment and jumped out of the window, ran across the street, grabbed a knife in a butcher's shop and stabbed a passing man. This was not a very reassuring beginning.

Then we had a woman patient who was paralyzed, had not walked for years. Dr. Hay said to me one day, "I am sure that woman is either hysterical or humbugging and I am going to try some very severe measures to find out." So he gave orders in her presence to the



THE REV. CLINTON LOCKE

nurse to have ready the next day a red-hot poker, which he intended to pass along her spine. This was rather startling to the woman and the next morning she said she felt better and could stand on her feet. So the doctor was induced to put off the cauterizing for a day. The next day she could walk and in a week could climb stairs. We could not exactly decide whether it was hysteria or malingering, but we lost sight of the woman entirely.

About two years after, a city newspaper came out one day with a long article headed "A Miracle of Healing," and went on to state that a woman who had been bed-ridden for more than a year had been instantaneously cured by fervent prayer. This article was signed by a well-known and estimable city clergyman. The woman was our old friend, and much as I disliked to burst the pious bubble of my fellow preacher, I felt it my duty to write and state publicly that she had been instantaneously cured before by the exhibition of a hot

(Continued on page 12)

Martha Borland Gift for New Research Laboratory

St. Luke's newest laboratory, made possible through the generosity of Miss Martha Borland, will enable the hospital to undertake another research project, and expand further our increasingly-important research facilities.

The laboratory, which is available to all members of the surgical staff, will enable them to carry on extensive research on the blood of surgical patients so scientific treatment may be given.

At the present time its facilities will be used by the Assistant Surgical Resident to fulfill the research problem demanded by the Surgical Specialists Board for eventual ratification.

Medical men are becoming increasingly conscious of the importance of fluid balance in the surgical patient and there is a demand for more rapid, accurate, objective methods of determining the fluid requirements of acutely ill patients.

Tests made in the laboratory will result in more scientific management of

patients with dehydration from lack of fluid intake; diarrhea, excessive sweating; severe vomiting; shock of a psychogenic, traumatic or postoperative origin; hemorrhage, either obvious or concealed; and severe burns.

By repeated tests during an operation, impending surgical shock may be predicted and offset by proper treatment. Shock due to circulatory collapse may be differentiated from shock complicated by hemorrhage.


The usefulness of these procedures in dealing with surgical patients will soon demand a full time technician to carry out blood studies.

Research of this nature has long been necessary. Up to this time funds available for research have covered only the most essential laboratories. It is hoped that as the public becomes better aware of the benefits to humanity derived from such research as St. Luke's is now undertaking, more and more public-spirited citizens will be prompted to support such work.



Time for Giving

"I shall pass through this world but once. Any good therefore that I can do or any kindness that I can show to any human being, let me do it now. Let me not defer or neglect it, for I shall not pass this way again."—*Anonymous.*



Alice Looks in on Public Relations

"I SEE by the papers," said Alice thoughtfully, "that they're planning to build a new Residence for the nurses at St. Luke's. Now won't that be nice?"

The Hatter, who had been dozing all through the meeting, opened his eyes very wide on hearing this, but all he said was: "Say, what is the Public Relations Department, anyway?"

Alice thought it rather queer that the question was put so abruptly, but since she was only trying to make pleasant conversation anyway, she didn't mind.

"Why a Public Relations Department," proceeded Alice, recalling something she had read somewhere, "helps the Hospital to acquaint its employees and its friends in the Community with its work, its services, what its aspirations are—yes, and what it needs. In that way both the Community and the Hospital can help each other better."

"Generalities, generalities, generalities!" screamed the Hatter. "Sounds like a Fireside Chat. Can't you give an example—but make it short, it's getting hot."

"Well," said Alice, still wanting to be polite, "take the new Nurses' Residence. Everybody would be interested in it, and probably would want to help build it, if they only knew how badly

it is needed, and what wonderful work the School is doing training nurses for defence, industry and civilian needs. But it isn't easy 'putting your story across,' as people say, and that is where the Public Relations Department comes in."

"Oh, this is great," said the Hatter, "just like riddles—but let's bring in Additions and Invitations."

"Additions and Invitations!" cried Alice, "But I can't see any connection between them and a home for nurses."

"Oh, that is where you're wrong," continued the Hatter, somewhat triumphantly. "There is every connection in the world."

Alice felt dreadfully puzzled at the Hatter's remark. It didn't seem to have any meaning at all, and yet it was certainly English. "I still don't quite understand

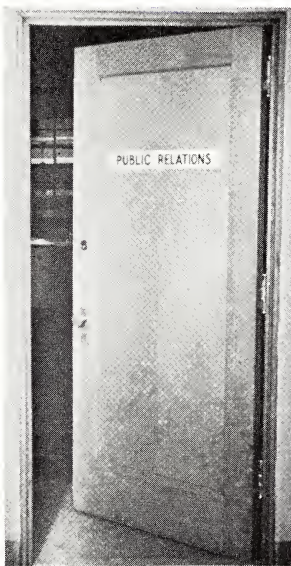
you," she said as politely as she could.

"Well, you said it takes money to build a Nurses' Residence, didn't you? Well, where there's money there's always Addition, and that is a very indispensable connection, isn't it."

Alice had to admit it most certainly was.

"As for Invitations," the Hatter went on, "I hear the Public Relations Department is always handing them out."

(Continued on page 15)



St. Luke's News

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DR. SELIM W. MCARTHUR, *President Medical Staff*

CHARLES A. WORDELL, *Director*

Vol. 2 AUGUST, 1941 No. 7

FREE HOSPITAL CARE

St. Luke's takes pride in its free health services for the poor and needy. But, obviously, more and more of such work needs and must be done.

The Hospital Association is established to help provide the funds needed for such free hospital care.

If you haven't already sent in your check, won't you please do so right away and help return some poor sick patient to health?

Every contribution helps give some sick, needy individual hospital care for at least one day.

Memberships in the Association are divided into five classes:

Honorary	at \$500 per year
Sponsor	" \$100 per year
Corporate	" \$ 50 per year
Associate	" \$ 25 per year
Active	" \$ 10 per year

We sincerely hope every member of the staff and every friend of St. Luke's will become a member of the Hospital Association.

PICTURES IN THE NEWS

The picture on the cover of this month's NEWS, showing Army nurses going through a gas barrage, was taken at Camp Lee, Va. It is another indication of the thorough training and extensive services of nurses in our Defense Program.

To minister to the medical needs of the thousands of soldiers in the U. S. Army, the War Department expects to have more than 4,019 such nurses in service by the end of this month. Single and between 21 and 40, Army nurses are graduates of approved nursing schools, such as St. Luke's, and the Red Cross Nursing Service, which serves as a reserve for the Army Nurse Corps. They have full rank of Second Lieutenant and a base pay of \$70 per month, plus maintenance and uniforms.

Other pictures in the NEWS, with the exception of the bottom picture on the back cover, are the work of our able hospital photographer, Joan Whiting.

The lower picture on the back cover was taken by Dr. Carl Johnson. We hope this is the beginning of many such contributions. We know that there are a number of excellent photographers among the members of the Hospital staff and the NEWS will appreciate any pictures you think will be of interest to readers. Let's see some of those vacation shots! Send them to the Public Relations Department.

CAMPAIGN PROGRESS

Friends of the Hospital will be glad to hear that pledges for the proposed new Nurses' Home total \$444,517 as we go to press. This is excellent progress but much still needs to be done to reach our \$650,000 goal. Let's go over the top!

Letters to the News

STEAM HEAT AND A WARM HEART

To the Editor of St. Luke's News:

I have always had a warm spot in my heart for St. Luke's Hospital, and for different reasons, as you will see from the following.

About thirty-two years ago, some of my friends secured the Chicago agency of one of the substantial eastern automobile manufacturers, and leased the store at 1421 Michigan Avenue, adjoining St. Luke's on the north. The owners of the building secured steam heat from the hospital.

My friends made me an attractive proposition to go in with them and manage the store, which I accepted. Those were the days when the factories simply manufactured open cars, without windshields, tops, or even lamps. A winter demonstration would chill the blood of an Eskimo, and whenever I returned from giving one, I would give one of my nice warm radiators a bear hug. Night or day, they were always warm, and the colder the day the hotter the steam. No wonder I soon came to have a very warm place in my heart for St. Luke's.

The next twenty-five years I spent mostly on Michigan Avenue. When for years the automobile business clustered around St. Luke's, it was often the case that someone would get hurt in the repair shop which each company maintained. Then off to St. Luke's would go the hapless chap returning in an hour or two with his arm in a sling or hobbling along on a crutch. Then, as now, everyone on Michigan Avenue had a

warm place in his heart for St. Luke's.

At seventy years of age, I decided to retire. Things went along nicely until one evening I was taken with a serious heart attack. As soon as I was able, I took my trouble to St. Luke's Social Service Department where I was put under a doctor's care. The doctor assured me that with proper care on my part he would be able to control my trouble.

During intervening years some member of the Staff has kept careful watch over me and now in my seventy-fifth year, I am in good health and everything considered, the "warm spot in my heart for St. Luke's Hospital" is getting warmer with each succeeding day.
Chicago C. P. W.

LETTER FROM RETIRED SENIOR MEMBER OF MEDICAL STAFF

To Dr. Gilbert and his associates on the Committee which arranged that wonderful dinner in my honor when I retired in 1936:

I never did and never can fully express my great appreciation of what you did for me on that occasion. I had misgivings about retiring, but in that atmosphere of regard and good wishes which you brought to me, I felt like bursting into song! (Lucky for you I couldn't sing.)

I want at this time to thank you for one gift of that occasion that I have just realized and which renews in me the gratitude I felt five years ago.

(Continued on page 15)

Around the Hospital

All of us "around the hospital" are sorry to hear that Marion B. Pierce has resigned as editor of the NEWS. Miss Pierce succeeded in making the NEWS a prize-winning magazine in twelve short months.



In spite of her protestations, we finally secured the accompanying candid shot of our ex-editor for the NEWS.

Here's wishing her loads of success in her new career and we sincerely hope she retains her indefatigable sense of humor, especially in the face of fast-approaching deadlines.



One of St. Luke's "hello" girls has just been elected a life member of the All-American Drum & Bugle Corps Association. After spending eight hours each day before the switchboard, Dorothy Gisser thinks that baton twirling is a pretty good diversion. She has become very proficient at it and made an appearance last week at Soldiers' Field.



School's out and Main 8 reports a run on tonsils and adenoids. It looks like every little Willie and Jane in Chicago wants to get rid of them before hot weather sets in.



Dr. R. M. Potter is following in his father's footsteps as a Radiologist with offices at 122 S. Michigan Avenue.

An average daily census of 400 patients since January of this year—that's a record according to John McSweeney who has been admitting patients to the hospital for seven years. Governors, Senators, movie stars—"Mac" takes them all in stride!



Miss Augusta Held, head nurse on "D" floor, was married to Mervin DeMott, on Friday, June 13th, in the Wee Kirk O' the Heather, California. Mr. and Mrs. DeMott return to their respective duties after a short trip to Yosemite. He is an engineer in the U. S. Navy.



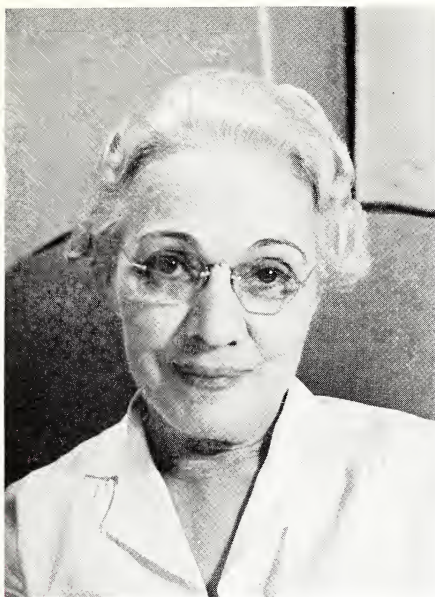
Joan Whiting, the hospital's photographer, was hostess at a birthday party for Mr. Muncie, the Comptroller, on June 20th. A cart of ice cream sodas, cokes, milk shakes, and what-have-you, was sent up from the Shop and "a good time was had by all." We still haven't found out how old he was. "Over sixteen" is all he will admit.



Incidentally, everyone thinks the new Lobby is a wonderful and much-needed improvement. Funds for the lobby were donated by a friend of the hospital. The decorating was done under the able direction of Miss Cornelia Conger and Mrs. I. Newton Perry of the Woman's Board.



Dr. Robert B. Engstrom, a St. Luke's interne, has put out his shingle in Michigan City.



Dr. Myrta M. Knowles, who has been head of the Department of Anesthesia since 1917, said goodbye, on July 1st, to her many friends at the hospital.

Dr. Knowles has taken an office in the Exchange National Bank Buildings, Colorado Springs, Colorado, where she will work only "when I feel like it."



What's the news from 'The Shop'? Well, this reporter has adopted it as her favorite hangout. Try it sometime. While you're at it, take on one of their super-special sodas. Honestly, they're the best in town!

And by the way, don't miss the lovely new magnolia plates with matching fruit bowls. I hear they're going fast.



Following the policy of many other monthly magazines, the NEWS will be published the third week of each month and dated ahead.



Help bring health to some needy patient. Join the Hospital Association.

Charles Schweppe Host to Nurses at Picnic

June was a month of picnics for St. Luke's. First, Mr. Schweppe was host to the Senior Class of the School of Nursing at his Lake Forest home. Later, Dr. Horace Lyons was host to members of the medical, resident and interne staffs at St. Luke's annual Field Day at Lake Geneva, Wisconsin.

Despite the bad weather, the nurses had an enjoyable time swimming. For lunch, the class was taken to Shoreacres Country Club. Here they also took part in group singing, dancing, taking pictures, and, oh yes, drying out before the fire. The group singing continued in the buses on the way back to the hospital.

The doctors' Field Day was originated four years ago to promote closer acquaintance between members of the Medical Staff and the resident and interne staff.

Golf, swimming and tennis were the chief sports this year. There were a number of prizes awarded for golf scores.

Six golf balls were awarded to Dr. North for a low gross of 79, three golf balls to Dr. Howard for a score of 84, three golf balls to Dr. Best for a score of 85.

Low net was won by Dr. J. Jensen with a 67. His prize was a golf shirt.

Dr. Jim Riley won a pair of socks with his score of 70.

Dr. J. Fitzgerald also received a pair of socks for high gross score.

Mr. Schweppe donated a prize for the doctor knowing the least about golf—Dr. George Coleman proudly claimed this one.

Dr. Coleman was later toastmaster at the banquet held that evening in the club house.

WHO'S WHO IN ST. LUKE'S: I

Time: 1905. Place: The famous spa at Karlsbad. Mr. Leslie Carter, President of St. Luke's, is having a chat with a member of the Hesse family.

As a result of this conversation, Emil Hesse, head bookkeeper here for thirty-six years, received an invitation to join St. Luke's personnel.

Everybody here knows Emil—despite the fact that he's "the shyest person in the hospital." Everybody likes him too—and that has nothing to do with the fact that he makes out the salary checks each month!

He tells us his hobby is his garden in Skokie. He can look you straight in the eye and say, "My delphinium grows 'this high'." One of his friends describes him as "a man who works harder and talks less than any one I know."



Horse and Buggy Days

(Continued from page 5)

poker. I have no doubt that, if living, she has been instantaneously cured two or three times since by some of the numerous treatments now in fashion.

The husband of the matron was a pompous old goose with a smattering of medical lore. One day a patient was dying and he rushed to Dr. Hay's office and wrote on the slate, "E moribund." The next day he appeared again and wrote "E morte."

(To be continued next month)

Charity in a Democracy

(Continued from page 2)

hospital is in every respect a center of education, vital to the health and welfare of the community, and quite comparable to a university in its many educational departments.

NEW NURSES' HOME

St. Luke's, in keeping with the trend toward more and better service, is soliciting funds with which to build a new Nurses' Home. Good housing conditions for student nurses insures the training of better nurses, means better care of the sick and injured, and is a vital element for National Defense. The new Nurses' Home will also release space for 150 hospital beds boosting the hospital's annual income by some \$300,000 and increasing our capacity for caring for free patients.

Every great voluntary hospital today in its buildings, equipment and, in part at least, its running expenses, stands as a monument to those who have given in the past.

Contrary to the generally accepted belief, whether a patient occupies a bed in a ward or the most luxurious accommodation the institution affords, the fee collected for this service at best only meets the actual operating cost of the service.

It is, therefore, self-evident that hospitals, run and operated not for profit, cannot by any possibility—from the fees received from patients—make improvements, add facilities, or meet the ever-increasing demands for adequate medical care which modern science imposes. Nor does this include the care of the indigent, which on careful analysis is essential in a great hospital, if the best care is to be rendered also to those who can pay. The poor are cared for only

in great teaching hospitals. Here the best care is obtained for all.

The present cost of hospital care to the patient is extremely high. Without question, the trend of national events is going to raise it much higher. It is unthinkable to raise hospital rates to the sick and injured high enough to build new buildings and make other improvements. It is for those who are well, for those who have in the past received the benefit of hospital care made possible by those who gave freely in the past, to open their purse strings and give. It is then both the greatest of charities and at the same time the cheapest of insurance for the day when each one of us and our loved ones will surely need a hospital. Few hesitate to pay \$50 annually for insurance on a \$1,000 automobile, which after all can be so easily replaced by an even better one.

THE AMERICAN WAY

How many feel a human life, their own life, or the life of a dear one is worth an annual contribution of \$50 for an institution such as a hospital where these lives that are irreplaceable are given the best chances for preservation in time of sickness?

Finally, when translated, these thoughts point out the fact that whereas a hospital is not in the strictest sense an impersonal and altruistic charity—and it is a personal necessity and safeguard for each and everyone—yet this is not a selfish viewpoint. The hospital is a community project built and maintained for all by the voluntary gifts of a free people. This is the *American Way*. If this type of institution is not voluntarily supported, the alternative will be tax supported institutions into which will be herded the regimented sick and injured—the *Totalitarian Way*—in which the type and degree of individual care will be politically decided.

Nurses Answer Call

(Continued from page 3)

the news that sailing orders had come, and a few days later a letter from her mother saying: "It is hard, but we want Barbara to make her own decision, and we are proud of her."

An efficient young head nurse, who has carried many responsibilities this past year, also joined the Harvard Red Cross Unit and now has her call to go to England so she prepares others to take over her work here, as she must go within the next few weeks.

INSTITUTIONAL NURSES

There are many others who have gone into Industrial Nursing and similar fields allied to the National Defense Program, where Public Health Nursing is vital to the daily welfare of the workers and the community. Here at home in our own institution there is a band of women carrying on.

All good civilian hospitals are crowded these days and are having extraordinary demands made upon them. Here at St. Luke's, our patient census frequently rises to the 450 mark. Four hundred and fifty people who have come to us for aid and assistance, who need educated, intelligent, kindly, nursing care. The professional women nursing in our hospital is made up of 49 faculty members, who are the planning, steering, guiding group; 87 nurses, the professional women who safeguard the patients' care and assist in guiding the student nurses; 248 student nurses, who are learning to become professional women. This nursing service is augmented by 16 ward maids and 25 orderlies. It is our job to care for our patients, to educate our students for the needs of the day, and to send out into the community steady, responsible young women who can meet the many demands

made today upon the nursing profession.

What of the National Situation? The Nursing Council in National Defense releases the following figures based on a study made this April (in which St. Luke's took part) of employment and need in 3,102 hospitals. In these hospitals there are a total of 170,000 registered nurses employed. They need 9,900 more registered nurses and have released 5,300 for National Defense.

NURSES' RESPONSIBILITIES

Miss Elizabeth Fox, Associate Professor of Public Health, Yale University, who was National Director of The American Red Cross Public Health Nursing Service from 1918 until 1930, writes in the June American Journal of Nursing of the twelve major responsibilities which Public Health Nurses may be required to shoulder. She divides these responsibilities into two groups. In the first group: In areas surrounding military camps; in new industrial centers; in industrial nursing; in large disasters; for rejected draftees; in expansion and intensification of public health nursing.

The second group, those which we might have to meet if this country were subjected to air raids or naval bombardment: Plan for evacuation; supervision in the shelters; first-aid after air raids; care of the sick and injured; maintaining normal services.

We all hope that we won't have to meet this second group of responsibilities, but we know that we must meet the first group. Miss Fox closes by saying: "Our problem is rather that of making our relatively small number of Public Health Nurses go round. We may need twice as many as we have. Surely it is time we began planning, each in our own community and on a State and National scale."

The American Red Cross Nursing Service goes steadily on its way. The enrollment in the Reserve Corps which enlists Nurses for both the Army and Navy, in January 1941 for the first and second reserve, serving active and home defense was 43,135. New enrollments are steadily increasing. In 1940, 300 registered nurses joined the American Red Cross Nursing Service, in April 1941,—16,000!

One of our students, in a paper on the American Red Cross, writes: "Truly, it must be an honored service, so many of our faculty members are wearing the Red Cross pin with their school pins!"

The Red Cross Nursing Service and Miss Mary Beard its director have other activities. Possibly some of you listened in the other night as Dr. Parran, Surgeon General of the United States Public Health Service dedicated "The Red Cross Training Course for College Graduates," which opened its doors on the Bryn Mawr Campus, Thursday June 25th, sponsored jointly by the American Red Cross, the Women's Medical College of Pennsylvania and Bryn Mawr College. If you did, you heard Dr. Parran make a plea to all communities to recruit the best of their young women for the good nursing schools in their vicinity.

BUILDING FOR FUTURE

We hope that before long the crisis in the world today will pass. We must be prepared to meet this crisis intelligently and wisely. In the years to come there is certain to be an increased emphasis on health. We have learned to recognize that through the prevention of disease and the restoration to normal health, we care for and rear a contented society, intelligent and able to develop the best in our civilization.

St. Luke's shares in all this work and

those of us, who are privileged to carry on in our institutions and to plan a bit for the future, call upon all the readers of ST. LUKE'S NEWS to help us in our Building Fund for the New Nurses' Residence, so acutely needed.

This residence is planned not only to house our student and graduate nurses but the educational unit as well, which now occupies the twelfth floor of the Main Building. Its release will provide much needed space for ward patients. We must secure the finest young women as students. We cannot get them unless we provide a proper place for them to live and study.

All of St. Luke's friends can help by sending from anything to very large gifts to the St. Luke's Building Fund, and by helping will know that they are sharing in the work of caring for our people both at home and in the army camps.

Letters

(Continued from page 9)

The Committee had arranged to present a desk to me. They were unable to select one before I left. I, too, was unable to select it due to the numerous things to be done before leaving town. The price of the desk was handed to me and when I got to Tryon, N. C., I found there was no place for a desk in the cottage I had rented.

Then we decided that the summer heat in Tryon was not good for us and spent a year touring the country for an ideal location with the resulting verdict that there was no such place. So we finally landed back in Chicago where we awaited developments, never losing sight of our determination to get away from the high speed and soot of the great city and find a smaller, quieter place. We have decided on Boulder,

not claiming that it is ideal, but better for old people than Chicago.

The desk is a joy to me. When I sit down to write I always have a pleasant thought for the kind friends who gave it to me.

Thank you again, my good and loyal friends.

S. C. PLUMMER, M.D.
Boulder, Colorado

Public Relations

(Continued from page 7)

There are Invitations to serve on this Committee and that, Invitations to have your picture taken, and, if I'm not mistaken, always Invitations to dig down in your pocket."

And with that remark the Hatter began to snooze again—Alice was feeling a little tired too, and everybody agreed it was time for the party to break up.



BIT OF HUMOR

An invitation to dinner had been sent to a newly settled physician, and in reply the hostess received a letter so hopelessly scrawled that she was unable to make out whether it was an acceptance or not.

"Take it to the druggist," said her husband. "Druggists can always read doctors' writing, no matter how bad it is."

She did so. After looking at the letter a moment, the druggist went to the rear of his store. In five minutes he returned with a bottle.

"There you are, ma'am," he said, "that will be fifty cents."



Join the Hospital Association.

STUDENT NURSES ENJOYING SWIM DURING ONE OF THE ANNUAL
PICNICS GIVEN BY CHARLES SCHWEPPE, PRESIDENT OF THE HOSPITAL



DRS. A. R. MORROW AND C. E. SHANNON AT RECENT MEDICAL STAFF
OUTING AT LAKE GENEVA COUNTRY CLUB.

St. Luke's NEWS

BEHIND THE LINES



Letter from England

by

Barbara Neal, R.N.

New Nurses' Home Message

by

Charles H. Schweppe

September 1941

A Message on the New Nurses' Home From ST. LUKE'S PRESIDENT

On behalf of St. Luke's I want to thank our many friends who have given so generously for the urgently needed new Nurses' Residence. More than \$150,000 has already been pledged. That is indeed good news.

I know there are many of you who plan to give but have not yet sent in your pledge cards. There are other public-spirited citizens who, as they become acquainted with the splendid work of the St. Luke's nurses in defense, in industry and here in our own hospital and community, will make a contribution.

The proposed new residence will not only provide an adequate home and additional educational facilities for our nurses, but at the same time it will release three floors, now housing new students, for hospital care for additional sick and needy patients and free work.

You are invited to visit St. Luke's to learn for yourself how a non-profit hospital operates and to see some of the hundreds of sick, needy patients whom your contribution will help restore to health and happiness.

Many thanks again to all our friends and to those members of the Nurses' Alumnae who have contributed so generously. I sincerely hope there will be many others of you who will help us reach our goal. All contributions, however small, are welcome. Won't you send in your pledge today?

Sincerely yours,

Charles St. Schuyler

A St. Luke's graduate, class of '41, writes of her experiences with the Harvard Hospital Unit of the American Red Cross in England.

Letter from England

BY BARBARA NEAL

SO VERY much has happened, since the day we left New York, that there are times when I still can't believe that we are actually in England, practically ready to start our work with the Harvard Hospital Unit.

We crossed in convoy, the trip taking about twenty-three days, so by the time we arrived in England, the eleven of us in the group felt as though we had known each other for ages.

After landing in England, we spent three days in London. Two of the three days were taken up with negotiating with the local police, getting ration and identification cards and a million and one other things. We also met the girls that had come on ahead of our

group—twenty in all—and had some good times swapping stories.

The last day in London was spent sight-seeing in a superficial way; though we did manage to see quite a number of the more famous buildings in London, we did so in such a hurry. I'm almost sorry now, that I looked at St. Thomas'—the bombs have done a pretty thorough job.

The day we got to London, we had a bit of news that was quite upsetting, that being that our hospital will not be ready for occupation or operation until the first of August—perhaps not then. The main reason for delay is due to the fact that quite a bit of important material was lost, after getting over here, through bombings.

However, we girls feel as though we were being of some help because we have been temporarily placed in a hospital, outside of London, where any number of nurses could be used. The hospital, now housing five hundred patients was, before the war, a seventy-five bed hospital, for the care of only cancer patients. The adjustments to be made have been terrific.

Most of the extra patients are taken care of in huts put up by the government, which house forty patients each. These patients come to us with all types of illnesses and injuries; we still have some boys who were brought in after Dunkirk. Bombing casualties are now limited, due to the long spell of quietness, but should another blitz come, we will have our hands full.

(Continued on page 11)



NURSES VISIT WESTMINSTER ABBEY

Progress in Research

BY DR. CARL A. JOHNSON

INVESTIGATIONS thus far completed and published through the Department of Clinical Research include studies on light sensitivity of the skin and studies of the vascular diseases of the extremities, such as Raynaud's and Buerger's Diseases. Papers have been published on the treatment of pulmonary embolism; the treatment of shock and vascular hypotension; and the indications for the use of oxygen therapy. New methods have been developed for the study of the circulation, capillary fragility and for the study of the electrical changes in the stomach.

The Department of Clinical Research, being in its infancy, its future needs cannot be anticipated; but it is obvious its needs will grow. Research is done best in a hospital with accommodations for taking care of the patient during the time a study is being made.

DRS. HOBBS AND BYERS IN RESEARCH
LAB.



It is to the advantage of the patient and the hospital that new means of study be devised to investigate further the many unsolved problems in clinical medicine. A closer correlation between clinical medicine and the basic sciences, such as physiology, chemistry, and bacteriology, is desirable.

HISTORY OF DEPARTMENT

The organization of the department dates back to December 13, 1937 when the problem of adequate facilities was presented to the Medical Staff at its annual meeting. The Staff approved a plan recommended by Dr. Selim W. McArthur which provided for the appointment of a committee to serve five years. This committee was to organize a department for the study and treatment of vascular diseases. Since then, any study related to medicine and surgery has been included. Dr. Grant H. Laing has been added to the original committee which consisted to Doctors Scupham, George K. Fenn, Richard B. Capps, Geza de Takats, and C. A. Johnson.

Investigative work is in progress continually in the department but is limited because of the lack of endowed beds in which patients with particular diseases may be hospitalized during the period of special treatment. Funds for fellowships to encourage young men in the field of investigation also are needed. These deficiencies are vitally important. It is hoped they will be taken care of with the growth of the department.

Nurses Get Their Wings

TIME was when a student nurse had very little difficulty deciding exactly what she would do after graduation. She was either an institutional nurse or a private duty nurse.

Today, opportunities in nursing are numerous. One of the most recent careers opened to nurses is serving the airlines as a stewardess.

For firsthand information about this new career field, we went directly to United Airlines where two graduates of St. Luke's School of Nursing, Theodora Larson and Jean Orr, are now employed.

United's Passenger Service Department reports that approximately 5,000 applications from air-minded young women are received each year. Most of them can be quickly dismissed because applicants are not graduate registered nurses—a requirement established as a means of uniformity for stewardesses and because it is believed that institutionally-trained girls are better adapted to the work of caring for passengers.

In addition to being graduate nurses, prospective stewardesses must meet standard physical requirements. They must be not over 25 years of age, between 5'2" and 5'5", not over 125 pounds in weight and in good health. They must have pleasing personalities and the ability to meet and talk with people easily.

Applicants who are tentatively accepted are put through three weeks of training. Included in the course are detailed instructions regarding steward-

esses' duties, talks on attitude and appearance, and lectures by department heads on various aspects of company operations.

Instruction on duties include everything from making up berths on sleeper planes to lessons on the proper way to serve as many as twenty-one full-course meals while flying along at 200 miles per hour; instructions on the care of babies to discussions of schedules and services of connecting lines.

The average length of service by anyone is two years. Virtually all who resign from the service do so for matrimonial reasons according to company officials, who sometimes despair at the sudden loss of some of its best girls as a result of Dan Cupid's forays.

STEWARDESS THEODORA LARSON



When St. Luke's Was Young: II

BY THE REV. CLINTON LOCKE, FOUNDER

(Written in 1895)

THE Board of Trustees of early St. Luke's was composed of all the city Rectors (there were only fourteen then) and a layman from each parish. In the act of incorporation, Mr. Fuller, without my knowledge, inserted a clause making me the president as long as I was Rector of Grace Church. I always declined to avail myself of this, and insisted on being elected every year as the other officers were.

An important step was the securing of the services of Miss Sarah Miles as the matron and head of the house. She was so thoroughly capable and devoted that she relieved me of much care, and often when I was in the deepest anxiety about the necessary funds, would say in her cheery way, "Keep up courage, Mr. Locke. God will provide for us."—and He did.

The Bishop now began to thaw toward the hospital, and in his address on September, 13th, 1865, he was good enough to say: "It is with no small gratification that I enter and utter the title 'St. Luke's Hospital' as at last indicating that there has been a movement in the direction in which we have been and are so singularly deficient as a diocese, institutions of benevolence and education. This one has sprung more from congregational effort than the broad, genial, consecrated impulse of either the committee or the Churchmen of our large city. Still, it is in shape to appeal to all these, to win co-operation and sympathy and prompt enlargement to equivalent usefulness."

I rather think that if I had waited for the "broad, genial, consecrated impulse," St. Luke's would still be a "castle in the air."

In my report to the Diocesan Convention of 1865, I expressed the hope that before long we should see a noble building with its sisterhood and its many beds, offering gratuitous assistance to all those of any creed who had not the means to help themselves, but quite a time was destined to pass before those hopes were realized, for we remained in the State Street house until 1871.

Illy adapted this house was for hospital purposes. In the rear was a noisy machine shop. It was badly ventilated—had but few of those conveniences without which we can hardly understand a hospital being carried on for a single day.

The autopsies were performed in the dining room and on the dining room table, which was not appetizing to the staff who had to dine there, and who were unfortunate enough to possess vivid imaginations. The drugs were kept in the dining room and we had no place to keep a dead body until the funeral.

But there was a great deal of earnest Christian work done there. The faithful Board of Directors, among whom was Mrs. Ryerson, the mother of the present president, never flinched in their efforts to provide funds, and Dr. Owens, then as now the medical head, gave unremitting attention. In 1869 a department for diseases of the eye and ear was opened under the care of Dr.

ST. LUKE'S NEWS

Samuel J. Jones, and a free dispensary in the useful dining room, in which, if aired for an hour before each meal, it was possible to eat.

I am sorry that I remember much better some of the amusing incidents occurring in this house than the pathetic ones, though one of the latter kind stands out in my memory.

A very handsome, powerful man, apparently in perfect health, came to the hospital one afternoon. He said, "My leg seems numb. I have no feeling in it." The doctor examined it and said to me, "The man is doomed. There is a clot of blood. It cannot be located so that an amputation might save him. You had better prepare him for death."

I shall never forget his stupefaction on being told this, his wild rebellion, his determination not to believe what was said, until at last he gave in, met his fate with a Christian spirit, and charged me with messages for his family in England.

I remember we had for a patient a woman who had been a circus rider, a poor, weak, vain thing, who kept rouge under her pillow that she might dab her cheeks with it. She had a husband who was as weak as herself, who used to come and play the guitar under her window, which, of course, on State Street, attracted a crowd.

I went in to pray with her one day. Just as I was about to kneel down, she turned her eyes on me and said, "Ah, Doctor, I wish you could have seen me strapped to the back of a horse playing 'Mazeppa'." That was too much for my gravity. I rushed out of the room to laugh and there were no prayers with her that day.

I once asked a female patient if she had a husband. "Yes," she said, "but he was took with the leavings." She meant he had deserted her and spoke of it like a disease. If it was one, it was infectious for we have had many cases since.

(To be continued next month.)

WOMEN'S WARD (3-W) IN OLD ST. LUKE'S ABOUT 1895.



St. Luke's News

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CHARLES A. WORDELL, *Director*

Vol. 2 SEPTEMBER, 1941 No. 8

GOOD LUCK, MR. WORDELL!

St. Luke's will miss Charles A. Wordell, who is leaving on August 30th to become Director of Children's Hospital in San Francisco, California.

Mr. Wordell has been Director of St. Luke's since 1929. He leaves many friends and an excellent record of service and devotion to the hospital.



He began his career in 1911 under the supervision of Louis R. Curtis, who was Director at that time. Mr. Wordell rose through a series of positions to become Assistant Superintendent. Later, he became Director of St. Luke's Hospital in Denver, Colorado, where he remained for several years, returning here as Director in 1929.

He was the first president of the American College of Hospital Administrators, Executive Secretary of the Colorado Hospital Association from 1925 to 1927, President of the Chicago Hospital Association from 1931-33, and is now a Director of the Chicago Hospital Council.

During his tenure of office many changes and improvements have been made. "All of these things," Mr. Wordell insists, "were made possible only through the very close cooperation given me by the Board of Trustees, Medical Staff, and other organizations in the hospital."

(Continued on page 14)

THE PRESIDENT'S MESSAGE

The NEWS would like to call attention to Mr. Schweppe's message, on the new Nurses' Home.

St. Luke's needs a new Nurses' Home not only to provide an adequate residence for its nurses and to free for patient use the space which new students now occupy in the main building, but to continue to serve the community—and the nation—by training expert nurses for the increasing civilian and defense needs.

We sincerely hope that all friends of St. Luke's will read the message by Mr. Schweppe who is doing so much for the hospital himself, and will give this project their generous and wholehearted support. All contributions regardless of size will be greatly appreciated!

Letters to the News

THANKS FROM A FRIEND

On March 15, 1941, you had a patient enter your hospital without funds and in a miserably poor, run-down condition. This patient stayed in your care having undergone a leg amputation. After living there from the 17th of March to the 22nd of April, she came to our house as well as could be expected.

She has since attended the Clinic at times designated by her doctor, and has always received from him the same gentlemanly, kind, efficient and helpful care that has added so much towards bringing her back to a reasonable portion of health. To accept all of this and to have nothing to add specifically to the hospital, prompts me to say, "May God's richest blessings attend all of you and as daily you go about your work, may you remember those words of 'Holy Writ':

"Inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto me." And may all of you find comfort in knowing that in whatever rank of society you may serve, you will never find gratitude more sincere nor a family more appreciative of your kindness, skill and service than we.

Respectfully,
Mrs. C. R. W.

Gary, Indiana

ABOUT THE NEWS

I liked your last issue of The News—especially the Alice and Mad Hatter story!

ERNEST THOMPSON

Chicago, Ill.

Your August issue of "St. Luke's News" is, in my opinion, the best yet. I have enjoyed reading everything in the book, and I am sure there is evidence of some nice news evaluation.

LARRY DAVIS

Walpole, Mass.

I thought the last issue of The News was excellent, but I'd like to see more about the Indiana side.

MELVIN LOHN

Chicago, Ill.

The cover picture on the last News was tops and so were the stories. Congratulations!

HENRY LARNER

New York City

MEDICINE AND MUNITIONS

To the Editor of The News:

Dr. Carl Fischer and I are here as medical directors of a government munitions plant which is surrounded by forty-four miles of cyclone fence. Its tremendous size is almost beyond comprehension, and I believe one is safe in assuming that if this type of thing is occurring all over the United States, we need have no fear of Mr. Hitler.

The plant in full production employs fifteen thousand people. These people are chosen most carefully and checked and re-checked to prevent the intake of saboteurs.

We are attempting to organize a medical department which will simulate a miniature St. Luke's for completeness.

(Continued on page 14)

Around the Hospital

It's a silver anniversary for Maud M. Gooch, Assistant Director in charge of Night Nursing Service.

An anniversary celebration was arranged for her by her many friends. Gifts were presented from her fellow nurses, the Board of Trustees and the Woman's Board.



A letter of congratulation sent to Miss Gooch by Dr. Selim W. McArthur, President of the Medical Staff, says:

"I always knew that under your 'top-sergeant manner' you had a heart of gold." And we all agree.

Good luck and many, many happy returns!



Be sure to see the September 1st issue of Vogue. Mrs. Edwin Ryerson tells us there will be something in it about the Shop and maybe about the Fashion Show too!



That reminds us that members of the Woman's Board are already hard at work on plans for the Fashion Show to be held this year on October 21st. Better get your tickets early!



Dr. W. Allen Conroy joined the family circle as Director of the Department of Anesthesia on August 4th.

The National Defense Program is certainly taking a good many of our residents and interns. The more recent ones include:

Dr. Barry Raney who is now in the Army Medical Corps at Savannah, Georgia.

Dr. R. Kinzer, formerly of the X-Ray Department, is now teaching at the Army Medical School in Washington, D. C.

Dr. Milo Shosser has joined the Medical Department of the U. S. Army munition plant in Joliet, Illinois. Dr. Shosser and Ruth Uebler, of the Nursing Staff, were married recently.



For the first time in its history, St. Luke's has accepted women residents.

Dr. Anne Holovachka is Resident in Neuropsychiatry. She received her training at Indiana University School of Medicine and her internship at St. Joseph's Hospital, Atlanta, Ga.

Dr. Mary Martin is a Borland Fellow in Pathology. She graduated from Northwestern Medical School and interned at Albany Hospital, Albany, N. Y.

Welcome to St. Luke's family.



DR. HOLOVACHKA



DR. MARTIN



CHARLES H. SCHWEPPE
(Message on page 2)



If you need a new car, you'd better buy a share in the new Studebaker to be raffled at the Fashion Show. The car was given to the Woman's Board by Mrs. Stanley Keith and shares are on sale in the Shop at 25¢ each.



By the way, have you heard the story told by one of our doctors about the student who called him in the night? The dialogue goes something like this:

Student: "Hurry over to our fraternity house, Doc, there's a fellow here who has something the matter with his eyes."

Doctor: "Must be serious if you wake me up at this time of night. What's the trouble? Does he see elephants and snakes and things?"

Student: "No, sir, that's why I called. The room is full of them and he can't see any."

From England

(Continued from page 3)

We work long hours—eleven a day, and though it does seem like a hard grind at times, it isn't as bad as it was the first week, or so, that we started to work. I have been on night duty ever since we arrived—from eight to eight with an hour off, if there is time, and though there are times when I feel like pulling out my hair—nevertheless it is a grand experience and I am enjoying my work immensely.

U. S. VS. ENGLISH NURSING

We certainly have been having our troubles—and at times many a good laugh over the differences between American and English nursing! I believe the hardest thing to "take" has been the fact that over here nurses are not professional people; at this point they seem to be a cross between Florence Nightingale and Sarah Gamp. And when you have been in the habit, for instance, of being able to give your own medications, it's rather hard to have to run to the head sister to have them checked.

So far we have not had to put up with any active discomfort or want; there are things that are hard to get, others that are impossible to get, but on the whole, I'm sure our position doesn't warrant the amount of worry that I'm afraid goes on at home, by our parents and friends. How nice it would be if we could only convince those people of that fact. The food, though much different, is ample—proved by the fact that I've managed to gain five pounds!

I will write again, and I hope I'll be able to tell you that we have started our work out at Salisbury.

*First in an exclusive series of sketches
on reporters covering the news fronts.*

How They Do It: I

BY FIELD BEAM

SOMEWHERE, someday, in the records of American journalism, there should appear brief notations on the various departures and comings-back of Robert J. Casey, Chicago Daily News foreign correspondent.

For years Bob Casey has made the world his beat. His recent return completed twenty-two straight months of war reporting, covering 57,000 miles.

In September, 1939, when Nazi Germany unleashed its blitz against Poland, he saw the world tottering a great deal more clearly than most people ever dreamed. There was his story—over there—so Bob prepared to return to the Western Front where he had won three citations for bravery as an artilleryman in the first World War.

He barely missed Nazi wrath by slipping out of Luxembourg during the dark days of May, 1940. Later, while careening wildly behind the French lines in a staff car he suffered several broken ribs when the machine cracked up.

His horrible night in England with an "ack ack" (anti-aircraft) battery going full blast, when he and the artillerymen boldly examined a huge Nazi parachute bomb that failed to go off offered him something "very few people living outside Germany have ever seen."

He wrote of a gale-swept journey through the North Atlantic, how the wireless operator told him there were SOS calls from five ships in a 50-mile radius. Some of his friends on that



CASEY AT THE FRONT

sturdy blockade runner had survived torpedoes. That night, for some miraculous reason, there were none. Bob went on to the Middle East (or the "Muddle East," in his terminology).

There his charmed life under fire came within a breath of extinction when excited Egyptians pushed him out of a train as Nazi airplanes swept low headed for a Suez bombing. He was hospitalized for two months. After recovering he took a boat from Suez for America and traveled back to the Chicago Daily News where he has been writing a brilliant series of articles on what he saw.

New Citizens



July brought ninety-two healthy new citizens to St. Luke's—forty-five boys and forty-seven girls. The proud parents are:

Boys to Mr. and Mrs.

Paul Huffard
E. B. Walker
Fred Pacholke
Bill Eisner
John C. Thomson
Harry Arnold
Frank Nawrocki
Lester Stebor
Thomas Cooper
Franklin K. Mullin
Melbourne Schoch
Thomas Fitzgerald
Aubrey Murphy
Edlar Gill
Thomas Davidson
Angelo Erdakos
William Schaffrath
Homer Talbert
Dr. E. H. Dangremont
Paul Hesson
John Dougherty
R. G. Henninger

Frank Marschak
Lewis Mendoza
Stanley Zajac
Theodore Hopkins
Theodore House
George Demetrio
Samuel Sutton
Calhoun Norton
Joseph Proskey
Jacob Fisher
Sylvester Watson
Stewart Rice
James DeNovo
Richard Juergens
Odell Cobbs
George Atkinson
Joe Siwinski
Edward Piscak
Stanley Urban
Frank Hamilton
James Favors
O. L. Murdock

Girls to Mr. and Mrs.

William Nickerson
Herbert Unzner
William Green
Stanley Cudecka
John Howard
Maurice Basquin
Melvin O. Lokensgard
Anthony Marcadante
Joseph Pizzicaro
George Nelson
T. S. Gary
Dr. J. B. Webster
Fred W. Blaisdell
Herbert Nieburger
John Wallace
Roland Alm
Al Gorin
John Murphy
Clifford Jensen
Justin Stanley
Herold Metz
George Fox

Gus Meister
Donald Larson
Bernard C. Grafft
William Meyer
Walter McRae
Anthony Krainik
Robert Needham
David Morris
S. Wojcishowicz
Ted E. Beck
Albert Howard
Richard Taylor
Ulysses Jackson
Robert C. Barr
Henry Mitchell
Howard Williams
Sidney Rosenthal
Walter Oakes
Wellon Rose
Ernest Eversz
George Kaiser
Lester Brewer

Twins to Mr. and Mrs.

Jerome Pavlik (two girls)
Al Kusler (one girl and one boy)

Well, good luck to you all!

About the Nurses Caps

BY HETTIE GOOCH, R.N.

The fragile piece of white organdy worn on the heads of St. Luke's nurses is not a mere ornament.

To the student nurse it represents the reward of four months' strenuous pre-clinical work and calls up memories of the Capping Ceremony held in Grace Church when the pre-clinical cap was discarded and the Director of the School of Nursing placed the St. Luke's cap upon her head.

Well the student realized that not only was the cap placed on her head but with it was placed a confidence that she would be equal to the heavy responsibilities awaiting her, not only during her three years of nursing education but responsibilities that would extend during her professional career.

An instructor shows each student how to make her own caps. The tiny pleats must be sewed in painstakingly. Material costs about 50¢ and the caps must be replaced on the average of every two weeks.

No matter where the graduate encounters a nurse with the St. Luke's cap, she can always claim kinship. To



her it is not just a piece of fluted organdy, it is a dear tie to her school and former classmates. It is a strong tie to the great body of women who have dedicated themselves to the profession of nursing.

MAIL

*Your Check for the Nurses' Home —
Now!*

Letters

(Continued from page 9)

There will eventually be ten physicians and forty nurses on the Staff. In addition to this, there will be first-aid workers on the production lines which are each one and one-half miles long.

Our work will be both prophylactic and active and we will have twenty available beds at this site. Our medical unit will include an operating room, an X-Ray, complete laboratory and four ambulances. Our more difficult work will be done in the LaPorte hospitals.

LaPorte is a beautiful town of seventeen thousand, and is now, I presume, similar to Nome, Alaska, during the gold rush. There is a tremendous surge of activity and housing facilities are difficult. The government is erecting four hundred FHA homes, and they will indeed be welcome. Many laborers are living in government supervised trailer camps and these would prove impossible during the winter months.

We miss everyone at St. Luke's, and take this opportunity to thank everyone for their many kindnesses to us during our pleasant years there. A later communique will be issued.

DR. L. J. WITKOWSKI
Kingsbury Ordnance Plant
LaPorte, Indiana



Story of the Cover

This month's cover picture was taken "somewhere in England" and shows a nurse reading to eight children orphaned through the war. Several St. Luke's nurses are now abroad with the Harvard Hospital Unit of the Red Cross helping with such work—other St. Luke's nurses have been ordered to be ready to go on 24 hour notice.

Who's Who in St. Luke's: II

Seeing that sheets, towels, stationery and a multitude of other supplies are on hand for every department in the hospital, is no mean task. Emergencies are unheralded so supplies must be ordered in quantities sufficient to handle mass disaster. That's the job of Nona Call.



Nona came to the hospital twenty-nine years ago as a telephone operator. After two years, she was made head of the Supply Room and there you will find her each day from 8:30 till 5.

She asked us not to tell about her hobby, in fact, she didn't want us to say anything about her at all, but it's too good to keep. She spends her leisure hours sewing nightgowns! We hear she's quite an expert at it.



Charles Wordell

(Continued from page 8)

The NEWS joins Mr. Schweppe and the Board of Trustees in wishing Mr. Wordell much success and happiness in his new position.



THE DOMESTIC SORT?

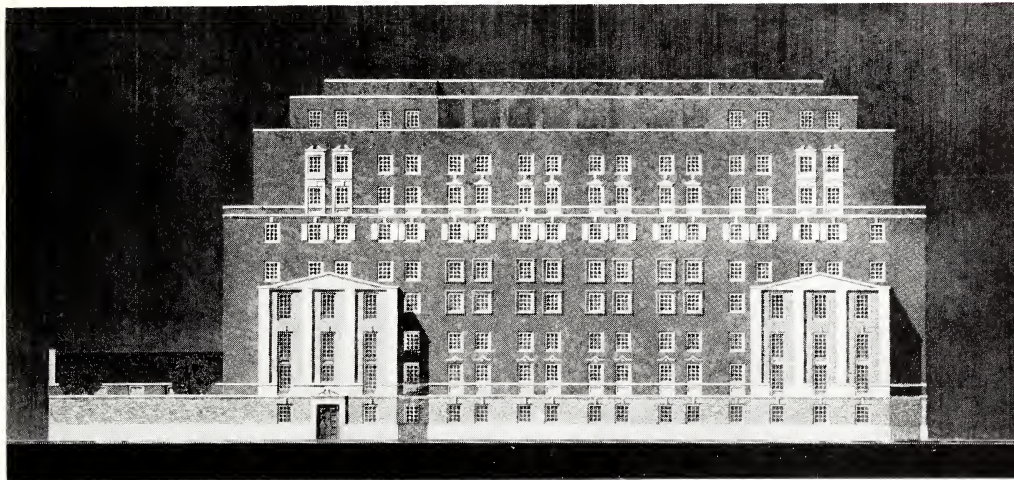
Rowley: I believe there is no sentiment he has such faith in as that "charity begins at home."

Sir Oliver: And his, I presume, is of that domestic sort which never stirs abroad at all.

Sheridan, School for Scandal

Give to St. Luke's

for its urgently needed
NEW NURSES' HOME



The new Nurses' Residence will:

provide simple but comfortable rooms for 293 nurses.

release three whole floors of Main Building, now housing students, for more free hospital care to the sick and needy.

provide additional educational facilities for training more nurses for increasing defense and civilian needs.

enable the School of Nursing to maintain its excellent educational standards and to attract the highest type of students.

SEND IN YOUR GIFT — ANY AMOUNT WILL HELP — NOW!

Opportunities for special Memorial Gifts:

\$250,000	will	name	Building	\$7,500	will	name	Dietetic Laboratory
100,000	"	"	2nd, 3rd or 4th floors	6,000	"	"	Lecture Room
60,000	"	"	5th or 6th floors	6,000	"	"	Directress' Suite
50,000	"	"	7th or 8th floors	5,000	"	"	A Floor Lounge
10,000	"	"	Foyer (1st floor)	3,000	"	"	A Reception Room
10,000	"	"	Sitting Room	3,000	"	"	An Instructor's Suite
10,000	"	"	Library	2,500	"	"	A Graduate's Room
7,500	"	"	Science Laboratory	2,000	"	"	A Pupil's Room
				200	will	furnish	a room

Mail your contribution to St. Luke's Hospital, Public Relations Department

STANLEY ANDERSON SENDS THIS PICTURE OF CAPE TRINITY
FROM HIS CANADIAN VACATION.



FLOWERS FROM MRS. GARY
AND MRS. WALTER B. SMITH
OF THE WOMAN'S BOARD



SOME OF THE NEW INTERNES AND RESIDENTS. READING FROM LEFT TO RIGHT: *Front Row*—W. C. LEWIS, W. R. GARR, B. P. PHIBBS, L. DE RENNE, R. C. LAWSON, E. P. SHERIDAN. *Second Row*—H. T. MERRELL, J. S. CLARK, S. C. SCOTT, H. C. MAXWELL, F. S. NORTH, W. H. MARLOWE. *Back Row*—M. M. THOMPSON, H. PUTMAN, JR., F. HIGSMITH, J. W. RILEY, C. H. MC LAUTHLIN, H. W. MERIDETH, L. W. DOYLE.

St. Luke's NEWS

ANNUAL REPORT ISSUE

*Proposed
Schweppe
Memorial*

*Fashion Show
and the Clinic*

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October 1941





Charles H. Schweppe

(NOVEMBER 18, 1880 — AUGUST 26, 1941)

As We Knew Him

DURING the past five years as Chief of Staff it has been my rare privilege to enjoy the close association and intimate friendship of our beloved president.

It is impossible for me, and I'm sure for anyone who knew him well, to write of him in a strictly impersonal manner. The profound grief and sense of loss in his passing is felt by each and every member of our St. Luke's Family from Trustee to ordinary worker.

It is my humble purpose here to attempt to bring out some facts not generally known or appreciated as proof, if such were needed, that here was a most remarkable character.

During these years, I have been in almost daily contact with him either at the hospital or at lunch or over the phone. This alone should serve to prove the unusual and constant interest he took in our institution. How often will be found an active businessman who will take the time away from his own personal affairs to confer thus daily on the problems of a charitable institution, whose Board of Trustees he happens to head? Even this is not the true picture, because not only were these almost daily conferences held with me—but there were similar ones with the administrator—the director of the Training School—various personnel and department heads—Board members—and also almost daily tours of inspection. Often he dropped in at the hospital at all hours of the day and night to see that all went well. Last year in mid-winter, uneasy that our night nurses were not adequately protected from possible molestation at change of shift, he took it upon himself, alone, to explore the alleys on both sides of the hospital between 11 p.m. and 1 a.m.

Not content with expending time, energy and thought on St. Luke's, he performed similar functions at County Hospital, Manteno and numerous other state or city institutions, to the extent that every spare moment of time away from his own business was devoted to altruistic and philanthropic work, to the almost total exclusion of personal relaxation and enjoyment. The last term is not quite correct because without shadow of a doubt, here was a man that unquestionably derived great pleasure and enjoyment in unselfish service to others. He delighted

in many little things, done daily and *always* unobtrusively—a toy to a sick child in the ward—flowers to some forlorn patient—tickets to a ball game to some humble personnel member—financial assistance to any worthy case that came to his ears. For years he furnished bouquets to all the nurses at graduation or at the other ceremonies of their curriculum. Annually his home and grounds were given up to the graduating class for a picnic.

On tours through the institution with him, he would turn to the administrator and suggest, "that office needed a new rug"—"this room a better desk"—and at the usual and probably proper demurrer from the administrator that "our hospital budget would not permit," he would quietly give the order—"Well just go ahead and do it and charge it to my account."

For years, coffee and doughnuts have been on hand in both operating suites each morning for the surgeons. These were paid for from this man's personal account. During the past year just to mention a very few items—the surgeons' locker and lounge in both operating suites were redecorated and modernly furnished by him. The same was done in the Staff coat and locker rooms in both buildings. The Michigan Avenue Lobby was entirely redecorated and furnished out of his own pocket. And what is more, the deed was done almost anonymously. Since January 1, 1941, in addition to a major donation to the new Nurses' Home fund, to the best of my knowledge, he had quietly paid more than \$10,000 for various small and large and very much needed improvements that would otherwise have been impossible of accomplishment under our essential hospital budget. During his life, I am fully aware that I never would have been permitted to reveal, with his permission, the details of his financial generosity to this institution. Now it seems my plain duty to reveal that he and his immediate family have given to St. Luke's since 1926 approximately \$750,000. Actually I am very certain he had no appreciation himself of the actual amounts he had donated to our cause.

Space does not permit a further enumeration of his specific benefactions, with this one last exception. A new Home for our nursing body has long been a truly vital necessity. The accomplishment of this project during the past few years, has been his major dream and hope. As to no other one connected with the hospital, he deserves the major share of credit—not only for initiating and instituting the essential Public Relations Department needed for this accomplishment, but by his own personal time, energy and work, he has been instrumental in collecting about 80% of the \$460,000 thus far contributed.

The clear and obvious duty of all of us left behind is to show our love and respect for our late great generous leader, by seeing to it that his last project is promptly completed.

What better, what more lasting and deserved testimony can be found to perpetuate the tradition of civic duty, philanthropy and tireless service to his fellow-men, which characterized the life of our beloved patron, than to name his last great effort "The Charles H. Schweppe Memorial Training School."

—SELIM W. McARTHUR

Among men there are always a few that stand above the crowd. They may be scholars, inventors, or men who have won distinction in the ministry, in medicine or law or more often men who have been successful in business. Rarely a man is distinguished because of his philosophy—his "Way of Life."

This man, often successful in the ordinary sense, is remarkable because of his conception of the obligations of wealth and because he finds his greatest pleasure in devoting his energies and his possessions to the welfare of the community. Such a rare individual not only confers direct benefit upon his fellow men but he arouses the nobler emotions in others and inspires in them a stronger faith and desire to help the less fortunate.

Such a rare person was Charles H. Schweppe. True he had his share of human frailties and more than his share of disappointments and heartaches—but he stood out above his fellows, not merely because of success in the field of finance, but chiefly because of his Way of Life. His untiring sympathy, understanding and generosity to those in need were simply outward expressions of his attitude toward the higher values of living.

To many of us his friendship was a privilege, and his memory will be an inspiration.

—JOSEPH A. CAPPS, M.D.

CHARLES HODGDON SCHWEPPE

Charles H. Schweppe was born in Alton, Illinois, on November 18th, 1880. He graduated as Bachelor of Arts from Harvard University in 1902 and became a trustee of St. Luke's Hospital in 1918. In 1922 he was elected second vice-president of the hospital. He became president of St. Luke's in 1925, an office which he held up to the time of his death in August of this year.

In addition to his work at St. Luke's, Mr. Schweppe served as vice-president of the Old People's Home. He was a member of the Board of Trustees of: Home for the Friendless, Shedd Aquarium Society, Chicago Zoological Society, Ferry Hall, and the Chicago Boys' Club.

He was named chairman of the State Board of Public Welfare Commissioners in 1939. He was president of Lee Higginson Corporation and a director of Marshall Field & Company and Fairbanks Morse & Company.

Mr. Schweppe was one of the organizers of the Plan for Hospital Care and a leading figure in the Chicago Hospital Council.

He is survived by a son, John Shedd Schweppe, and a daughter, Mrs. A. Watson Armour III.

ST. LUKE'S NEWS

Mr. Schweppe loved St. Luke's and all who worked with him to make the hospital a great institution. His insistence that our students and nurses should have adequate and comfortable living quarters resulted in the present campaign for funds with which to build a new Nurses' Home.

Through sixteen years of leadership, Mr. Schweppe has woven deep into the tapestry of St. Luke's a work that it is the privilege of each one of us to carry on.

—MADELEINE McCONNELL, *Director of Nurses*

As I have remarked about some of the members of our Medical Staff who are still living, so is the following quotation very applicable to our friend Mr. Charles H. Schweppe: "The smile on his face was but the lighted candle in the window of his soul telling us that his heart was always at home."

—GEORGE W. HALL, M.D.

In the passing of Mr. Charles H. Schweppe Chicago has lost a great civic leader, and we at St. Luke's have lost a great friend and benefactor. I cannot recall anyone who has taken the personal interest, given so freely of his time and been so generous to the hospital, as Mr. Schweppe.

—H. E. JONES, M.D.

The loss of Mr. Schweppe will be most keenly felt by the Rector, Vestry and all members of Grace Church. Mr. Schweppe's understanding of the relationship between Grace Church and St. Luke's Hospital, was genuine and always helpful.

—THE REV. WILLIAM TURTON TRAVIS

No one actively interested in St. Luke's Hospital and its welfare will ever forget Charles Schweppe's generous interest and cooperation or cease to recall his cordial handclasp and friendly smile. I have worked side by side with him in this common interest ever since he became connected with St. Luke's and I feel a deep sense of personal loss in his passing.

—ARTHUR R. ELLIOTT, M.D.

When I think of "my favorite uncle," Charles Schweppe, I am constantly reminded of his tireless energy, his ubiquitousness and his generosity with no thought of the time or the sacrifice that it entailed. That it was for St. Luke's was all that mattered. His work stands as a challenge to all of us to "dig in" and carry on, to the best of our ability, the work he has fostered for so many years.

—GEORGE H. COLEMAN, M.D.

Charles Schweppe's death was a great shock to me and I'm sure to all the staff of St. Luke's. The hospital and the entire community has lost a great humanitarian, benefactor and friend.

—EDWIN W. RYERSON, M.D.

Charles Schweppe exemplified the finest type of American citizenship. He was kind, unselfish, lovable and untiring in his efforts for the welfare of St. Luke's Hospital. It was an honor and rare privilege to have known him and words cannot express how sadly we of St. Luke's family will miss him.

—WILLIAM H. ZABEL

St. Luke's Sets Up Draft Board

BY E. LEE STROHL, M.D.

IN June, 1941, at the request of Major E. Mann Hartlett, the State Medical Officer of the Selective Service System for Cook County asked our Medical Staff to establish a board for examination and disposition of draftees.

The doctors, realizing that such service was gratis, agreed to take on the responsibility and a Board was organized.

The Board, made up of certified specialists, includes: a surgeon, internist, dentist, ophthalmologist, dermatologist, otolaryngologist, neuropsychiatrist, urologist and orthopedist.

Mass Production

Appointments are made for draftees by their local boards. The Board meets on Monday evenings at 7 o'clock and an average of fifty draftees are examined.

The draftee presents himself and is routed through the various specialists in much the same manner as mass production of automobiles.

Examination of his teeth is followed by a careful check of the ears, nose and throat. After examination of his eyes, he is ready for a more complete study of the vital organs below the neck.

At the conclusion of the examination, those draftees who have met the minimum standards of the Army, are examined by the neuropsychiatrist for possible mental defects. We feel this latter examination is very important because the morale of any army depends directly on the esprit de corps and that is evolved from the psychological outlook.

Examinations ended, the Board discusses each draftee in terms of the doc-

tors' findings. A classification is made and forwarded to the Selective Service System.

A draftee, who feels he has some complaint, can immediately appeal the Board's decision. In investigating such appeals extensive laboratory tests are often made by technicians who also donate their services. Internes, nurses and other hospital personnel also give freely of their time. A decision is made only after all of the specialists have given careful consideration to the appeal and that decision is final.

That our work is appreciated is evidenced by the fact that no less than five phone calls were received in one morning from mothers asking: "Is your board made up entirely of certified specialists?" On being assured that such was the case, they all expressed great relief that their sons would not be inducted into service unless their physical condition was good enough to withstand the rigors of such a life.

SAYING "AH" FOR THE ARMY



Fashion Show Funds Provide Free

ON THE afternoon of October 21st, the lights in the huge ballroom of the Stevens Hotel will be dimmed and down the runway will parade scores of society's loveliest models in the country's most glamorous fashions—the fifteenth Fashion Show given by the Woman's Board of St. Luke's Hospital for charity's sake will be underway.

Each year since 1926, members of the Board have worked like Trojans from early spring till late fall assuring the success of this very important undertaking. Tickets must be sold, newspaper publicity planned, scenery selected, models chosen—in fact, hundreds of details must be coped with as they present themselves.

The Board has now reached the point where it can run a successful Fashion Show as well as professionals. Com-

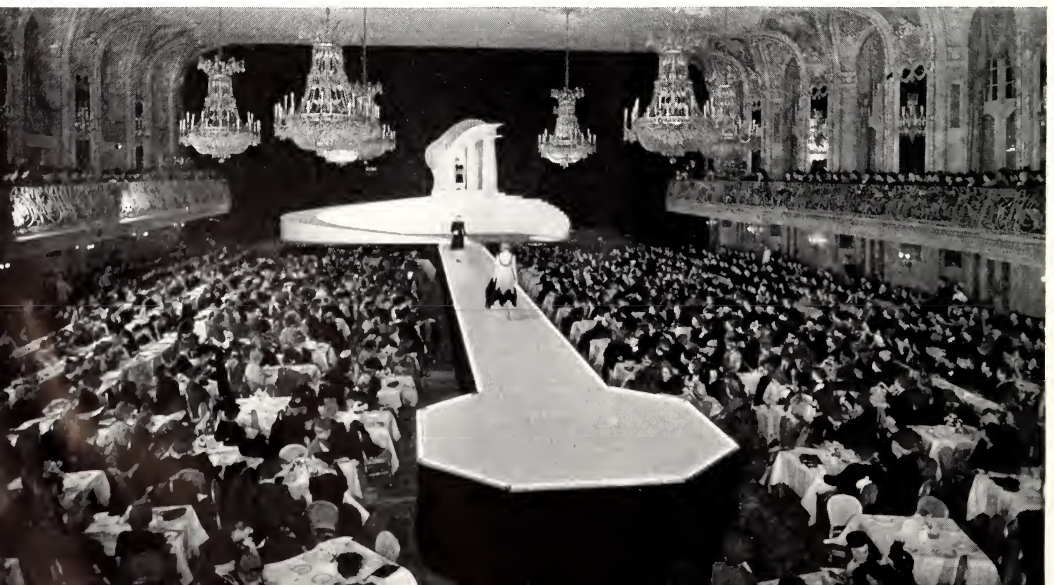
mittees are set up, each with a chairman and several members. Each committee is responsible for a specific job and members of the committee take pride in doing that job well.

A tea is given prior to the show for debutantes and young matrons at which time they are invited to assist in the Fashion Show either as models or cigarette girls.

All funds given to the Fashion Show for tickets or advertising, and all of the services rendered by so many people, are directly responsible for the maintenance of St. Luke's Social Service Department, the Occupational Therapy Department, and a number of other projects.

Information regarding tickets or boxes for either afternoon or evening performances can be obtained by calling Central 9036.

A ST. LUKE'S FASHION SHOW IN PROGRESS



Hospital Care for Sick and Needy

EACH year the staff of the Social Service Department—the poor man's family doctor—devotes more than 2,500 hours to caring for hundreds of sick and needy men, women and children, knitting together families torn apart by illness and poverty, giving a chance for survival to tiny tots who are helpless to cope with the problems of physical and financial difficulties.

These services are made possible through the generosity of St. Luke's doctors, nurses and The Woman's Board, who through their Fashion Show raise the funds necessary to maintain the Social Service Department.

But take the case of the Smith family, as we shall call them, and see how the Clinic works. Multiply the case several thousand times and you will have an idea of the scope of our work.

We met the Smiths for the first time

back in 1937. "Mama" and her youngest son, Ernie, were sitting on a bench in the Clinic waiting room early one morning before opening time.

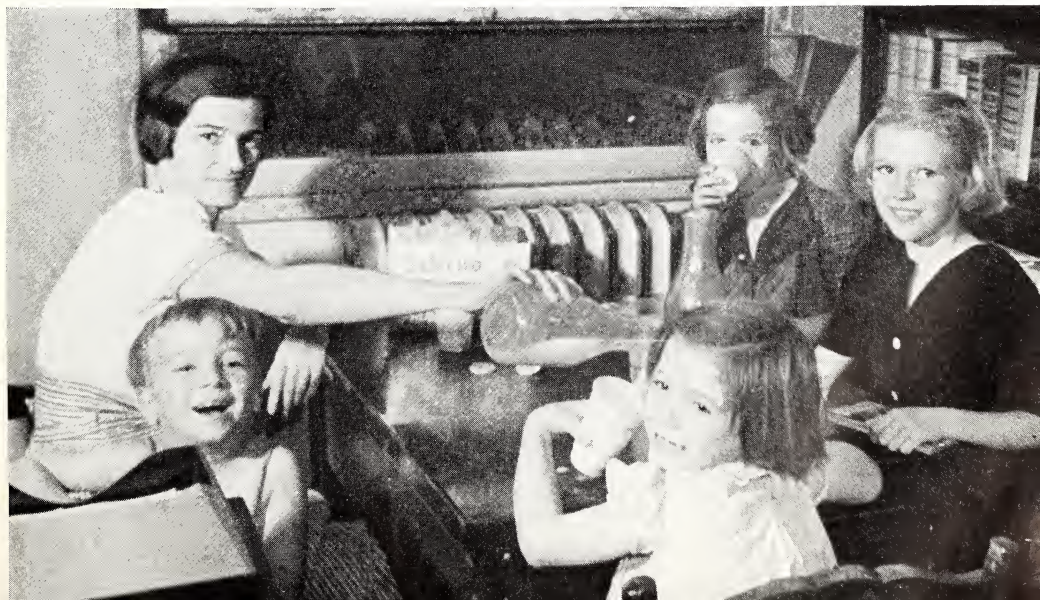
We learned with much interest that both Mr. and Mrs. Smith, up to the time of their marriage, lived in the 1600 block on S. Wabash Avenue—one block from St. Luke's. Notwithstanding the fact that they had seven children, all needing medical attention, and were on the relief rolls, this was the first time they had asked us for help.

Ernie, two years old, weighed 22 lbs. He was sadly undernourished and his teeth and gums were in a sorry state. We ordered him weaned and placed on a regular infant diet.

After caring for Ernie, we decided to visit the Smith home on S. Wells Street to check up on the other members of

(Please turn to page 16)

FASHION SHOW FUNDS MAINTAIN THE SOCIAL SERVICE DEPARTMENT



Around the Hospital

Miss Catherine Golden, of our Psychiatric Nursing staff, sailed from Boston the week of August 18th, to join the Harvard Red Cross Unit in England. She had been asked several months ago to be ready to leave on 24-hour notice. We've asked her to write us all about the goings-on over there, so perhaps we'll be hearing more about Nurses' activities in England in the very near future.



August 23rd has a red circle around it on Jimmy Toon's calendar. Jimmy, one of our elevator operators, received his very first airplane ride on that date from Dr. George Trimble of the Emergency Room, who is a licensed pilot. The ride was sort of a going-away gift to Jimmy who leaves to join the Army soon. (Just to prove how the hospital grows on you, the only place they could think of to go on the trip was around St. Luke's several times.)



News about the internes? Well, Dr. John R. Green was married to Miss Georgia Hillis, daughter of Dr. and Mrs. A. E. Hillis of Tacoma, Washington about September 17th.

Dr. Warren Simmons, who left St. Luke's for Texas, has been transferred to the Medical Corps in Alaska. Bet he'll be wishing for St. Luke's steam heat along about January.

Local newspapers announced on August 27th that Dr. E. M. Dorr of our Staff had been appointed president of a local Parent Association. We think it's awfully funny because the Dorr's welcomed their very first child, Deborah (Debbie) Dorr, at 11 P.M. on August 26th. Parent, indeed!



We found something interesting today. Helen Snapp, manager of The Shop, has set up a "What-Not" shelf for merchandise of reduced price. We warn you, if you examine it closely, you'll walk off with a lot of stuff you never even thought of buying before.



Miss Elizabeth Strunk, who has been the physical therapist in charge of the Physical Therapy Department for the past six years, became Mrs. John Stephen Linn on September 1st and will leave her position in a month or two. Miss Virginia Walkins who joined the staff on August 1st will take Miss Strunk's place.

Miss Gyda Erdmann, who has been Miss Strunk's first assistant, leaves the first part of November to become head of the Physical Therapy Department in Indianapolis City Hospital.



Marjorie Vetting of the O. T. Department spent her Labor Day holiday at the American Occupational Therapy Convention at Washington, D. C.

And the new face you see in the department belongs to Ruth Russell, a student from Milwaukee-Downer College who has been doing clinical field work.



STERLING MORTON
CHAIRMAN, CAMPAIGN COMMITTEE



This is your last chance—a bright, new Studebaker is going to be given away at the Fashion Show on October 21st. Shares are on sale in the Shop for 25¢—just think, you might get a lovely new car for just the fourth part of a dollar.



Dr. F. C. Jacobson has arrived from Madison, Wisconsin, to become Dr. Conroy's assistant in the Anaesthesia Department.



And look what we found in our mail—the first poem we've ever seen about a hospital:

I think it frets the saints in heaven to see

How many desolate creatures on the earth

Have learnt the simple dues of fellowship

And social comfort, in a hospital.

—Elizabeth B. Browning.

WHO'S WHO: III

A hospital must have heat, hot water and power. Supplying these things has been the job of Earl Morgan, our Chief Engineer.

Arriving at 8 a.m. each morning, he and his 16-man crew begin looking the plant over from attic to cellar.



His hobbies are golf, bowling and caring for a duodecimal ulcer—memoir of his army and navy days. Monday, 6 p.m., McVickers Theatre—is a standing engagement.

A remark about his service record brought this rejoinder: "Yes, and if they fire me tomorrow, I won't be surprised. They only hired me for two weeks' temporary work in 1915."

EVERY LITTLE BIT HELPS

Friends of St. Luke's raising money for our new Nurses' Home might be interested in the following:

About two weeks ago, I visited a gentleman who had been my patient over a period of years. The need for a Nurses' Home was explained to him and the progress already made reported. I asked him to contribute.

After debating for a moment, he said: "I'd like to help you but I'm afraid I can't. You know, I'm in no position to make a substantial contribution."

"But surely you could give us five or ten dollars," I argued.

"Five dollars!" he exclaimed with apparent relief. "I didn't know so little could help much. I'll gladly give you a thousand."

—SELIM W. McARTHUR

We Survive the Great Fire: III

BY THE REV. CLINTON LOCKE, FOUNDER

(Written in 1895)

THE Trustees often met and talked about buying a site and building, but nothing came of it and I was growing restless, when in the fall of 1871 Mr. John De Koven, the treasurer of the hospital, then as now and as members of his family have ever been, a warm friend of St. Luke's, came to me and said that a large frame building on Indiana Avenue, near 14th Street, intended for a workmen's boarding house, but which the builder was unable to finish for lack of funds, could be bought on very advantageous terms, and that the lot on which it stood and which was leased could be purchased on long time. He said that if I thought it would answer, he would not only give liberally himself, but help to raise the remainder of the money.

I went over the house, and while far from what I wanted, it was such an advance on what I had, that I eagerly accepted his offer. He gave me \$2,000 and in connection with E. K. Hubbard, another devoted friend of St. Luke's and for many years its secretary, got together a good deal of money. Mrs. John Tilden of Grace Church gave a concert which brought in \$731 and Mrs. B. F. Hadduck held a fair which produced \$1,212. Mr. N. K. Fairbank gave \$500, and now for the first time his name and his wife's name came into the hospital history, where they must ever stand as two of its greatest benefactors and untiring friends.

We took possession of this house on the 15th of May, 1871. It was all unfurnished and we did not dare to venture the support of more than twenty-five beds. Mrs. Locke begged from a few friends the furnishing of the chapel, and Mrs. Fairbank, Mrs. O. H. Stone, and a few others arranged a Charity Ball which furnished the beds, the refectory and the reception rooms. That was the first of a long series of Charity Balls, from which the hospital derived so much benefit. It now has to share with so many that the Ball counts for but little.

How well do I remember the opening night of the little hospital. The rain fell in sheets, but the Chapel was full. The Rev. Mr. Powers, the Rev. Mr. Sullivan, and myself made addresses, and Robert Goldbeck, the well-known musician, gave us some fine music.

In June of that year I found it impossible with my work at Grace Church to attend any longer to the religious services, and the Rev. Mr. Toll was appointed acting Chaplain. In July of that year Mr. Daniel Goodwin presented the hospital with an excellent library in memory of his departed friend, Richard B. Treadway. He still continues his interest in it, and has just added some new books and some furniture for the library.

In October came the great fire. It did not reach as far south as the hospital, but well do I remember saying to myself as I looked at the mournful

ST. LUKE'S NEWS

scene of utter desolation: "St. Luke's is done for now. Nobody will have any money to give to charity. I will be obliged to shut it up." My heart was wrung with anguish at the very thought, but God's ways are not our ways and He soon showed me that my grief was very much misplaced, and the fire, instead of being a misfortune, was the greatest blessing that could have happened to the hospital.

The Great Relief and Aid Society needed large hospital accommodations and they eagerly turned to St. Luke's as just the place for the sick poor of the more respectable class. They generously assumed the larger part of our expenses, they furnished all our vacant beds, they gave us money to pay for our lot. In fact, they supplied us with every possible want, and we were able to do far more good than ever before.

In 1872 the Relief and Aid Society, in consideration of our always keeping 28 beds at their command, gave us \$28,000, \$16,000 of which they obliged

us to invest in land, and with it we bought a lot on the corner of State and Fontaine Streets (near 37th Street) where we intended, at that time, to build our permanent hospital. I ought to say in justice to the Relief and Aid Society that it never exacted the "pound of flesh." Four or five beds were all it ever occupied at any one time since the fire, which was lucky for us, as the interest on \$28,000 would be but a drop in the bucket in support of twenty-eight beds.

The report to the Diocesan Convention of 1872, which is signed by Edward Sullivan, John Owens and E. K. Hubbard, states: "We have no income but the gifts of the church. They have never failed us, and we have faith to believe that they will be continued in answer to prayer and prudent watchful care in the management of our charge. We feel that we have the full confidence of the public and of the Church in the City of Chicago."

(To be continued)

THIS IS HOW THE CHICAGO FIRE LOOKED IN THE MOVIES



St. Luke's News

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ADVISORY COMMITTEE

A. WATSON ARMOUR, *Chairman Executive Committee*
MRS. JOHN W. GARY, *President Woman's Board*
DR. SELIM W. MCARTHUR, *President Medical staff*

Vol. 2 OCTOBER, 1941 No. 9

THE FASHION SHOW FOR FREE HOSPITAL CARE

For the fifteenth consecutive year The Woman's Board of St. Luke's Hospital is planning its now famous Fashion Show. From all reports the show, this year, promises to be the most spectacular yet held.

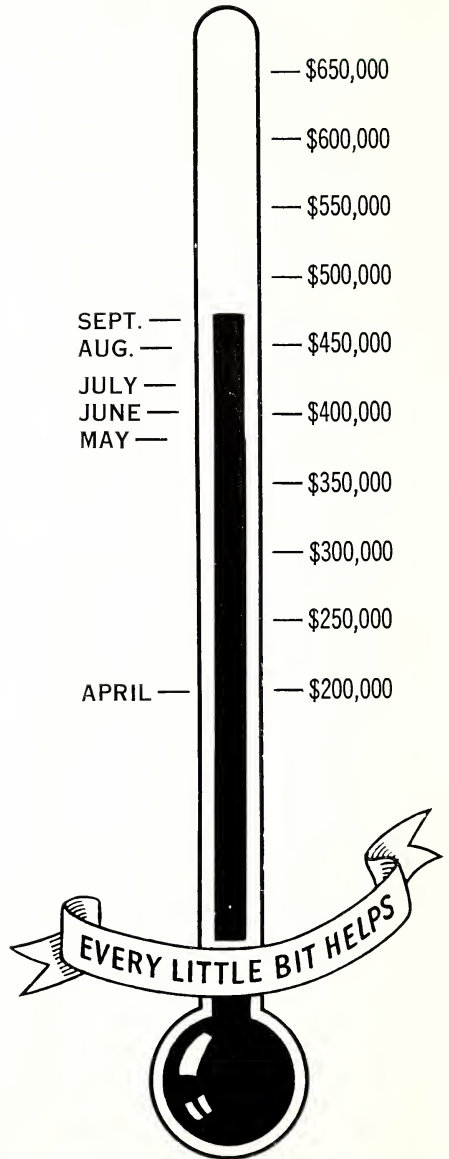
Needless to say, the Fashion Show deserves the support of all friends of St. Luke's; not only because it is concededly the best organized and most entertaining charity benefit of its kind in the country, but principally for the great purpose of the show.

As everyone who has attended the Fashion Show undoubtedly knows, funds from the benefit support St. Luke's Social Service Department, which every year gives free hospital care to hundreds of sick and needy patients.

Every ticket bought for the Fashion Show not only promises the buyer a great treat but at the same time makes possible free medical care for some sick, needy person.

New Nurses Home

FUND



Let's Go Over the Top

SEND IN YOUR CONTRIBUTION NOW

Letters to the News

"MY SECOND HOME"

I started coming to dear St. Luke's twenty-eight years ago and have not transgressed in the meantime always coming to my second home when illness overtakes me.

If all your organization of nurses measure up to the standard of what I have observed on "D" floor, then someone has words of praise coming.

I am leaving regretfully in a way, but, of course, on the other hand glad to get home to my wife and the comforts of our fireside after spending seven weeks with you.

In closing permit me to present to your management a Beauty Rest mattress with my compliments.

You can also count on me as an active member of St. Luke's.

Sincerely yours,

Chicago, Ill. Philip J. Marqua

"EVERYBODY HAS BEEN SO KIND"

Words cannot express my gratefulness to you for having arranged for my daughter to enter the hospital. A simple thank you is not big enough.

I feel indebted to all that I have contacted, both in the Clinic and in the hospital. Everybody has been so very kind. I do not know to what extent she can be helped, however, it is a great satisfaction to know that everything is being done that could be done even if we had money.

Thanks to you again—also to the entire Staff and to all that go to make such service possible.

Respectfully,

Chicago, Ill. Mrs. C. R.

THANKS TO THE STAFF

Please accept my sincere thanks for all that the Hospital, doctors, internes and nurses have done for my husband.

Never have I realized that so much unselfish devotion existed.

Again many thanks to all the wonderfully kindhearted people (unknown to us) who make it possible for one to get such good care and consideration in such a fine institution as St. Luke's. I wish I could show my gratitude in a more concrete way.

Gratefully yours,

Chicago, Ill. Mrs. I. C. W.

UPHOLDING THE TRADITIONS

May I take this opportunity of expressing my sincere appreciation of the very excellent care accorded me at St. Luke's between August 4th and 24th?

The pleasant atmosphere created by the attractive decoration and furnishing of the obstetrical floor are second only to the sympathetic, untiring services of the nurses and internes. They are certainly upholding the highest traditions of their very difficult profession.

Hinsdale, Ill. Mrs. M. B. R.

WHEEL CHAIR COURTESY

Permit me to congratulate you upon your remarkably efficient staff. I refer to your boys, who, noting that I limped as I came in, whisked me to the proper office in a wheel chair!

As a result of said courtesies, I am checking into St. Luke's on Monday.

Cordially,

Chicago, Ill. H. A.

Helping the Needy

(Continued from page 9)

the family. At the rear of a corner notions store, a steep stairway ended abruptly at the kitchen door. The kitchen was also used as a sitting-room, dining room and laundry. A gas range and electric washing machine were the family's pride—they were bought with the \$200 left from Papa's war bonus after \$600 was paid on debts.

The linoleum and table tops were thoroughly scrubbed; three aluminum kettles simmering on the stove shone like new; the washer and two tubs were filled with washed clothing; and the lines around the room held others drying. Two bedrooms contained a double bed each and four persons occupied each bed at night.

We had an opportunity to meet the other children. Fifteen-year old Anne was sturdy. Jack, fourteen, was tall, stooped and obviously sub-normal. The little girls, Jane and Patsy, were eleven and eight. Tommy was nine and already a reputed astute business man. He ran errands for storekeepers and sold Christmas trees on commission.

As a result of this visit, the Clinic dispensed special diets, dental care, refractions, toxoids, tuberculin tests, and personal hygiene instructions. Our dietitian explained regular food rules as well as special diets to Mama. We encouraged her to trade her decayed teeth for artificial ones. Glasses were provided for Patsy.

Just 1½ years ago, Jeanette was born at St. Luke's. Mama couldn't keep the secret and as soon as we learned of the expected event, we placed her under pre-natal care.

And so our family today is doing very well, thanks to the services made possible through funds raised by The Woman's Board Fashion Show.

New Citizens



Well, what do you know—only 87 babies this month, five fewer than last, but all healthy and happy. The proud parents are:

Boys to Mr. and Mrs.

James Modica	James Harrison
Nick Carl	Samuel Gilmer
John Grimley	James Boston
Henry Boldt	Samuel Davie
Frank Kottra	Anton E. Toman
Eugene Reed	Theodore Toll
Richard Jordan	John W. Kent
Herman A. Schell	Robert Horton
Dr. Paul Carney	Marl Young
W. K. Traynor	Paul Oliver
Arthur Groessel	W. B. Potts
Leslie Brinkman	Howard Renner
Charles Helfrick	Martin Matt
Albert McKissack	Eugene Still
Archie Trepanier	Marshall Anderson
Charles Norris	Frank E. Mueller
Thomas Reynolds	Arthur Ford
Frank Jesse	Eugene A. Meyer
Willie Willis	Edward Humphrey
Robert A. Donovan	W. C. Koontz
Fred B. Nordstrom	Clive Taylor
	George Sims

Girls to Mr. and Mrs.

Osie Corbin	Alvin Freeman
William Cunningham	Jess Prohaska
Roy Diffenbaugh	David Owens
Joseph Kowalonek	George Owens
Donald Payne	Bruce Montgomery
Wilfred English	Edward J. Bales
Anton Rizner	Dr. W. O. Townsend
James R. Getz	Lewis Ervin
Raymond Emerson	Paul Matthews
Isac Vance	Joseph Stack
Vito Agricisti	James Johnson
James Dumolin	Robert Bray
John F. Lynch	Paul Medellin
Harold H. Rochotte	Anthony DeFalso
Richard Sander	Lt. Chesley Evans
Douglas Rose	Robert Hartig
Dr. E. M. Dorr	Auguste Babize
John Pulliam	Henry Ferguson
John Altobell	Lucion Green
John H. Coman	Willis Christmas
Albert Green	William Crouch

Twin boys to

Mr. and Mrs. H. Fred Neubauer.

St. Luke's very best wishes to all of you!

Progress in 1940

ANNUAL REPORT SUMMARY

FOREWORD

THE following is a report to you from the doctors, nurses, department heads and other men and women of the Staff of St. Luke's hospital devoted to serving you, your families and the community.

We go to the trouble and expense of issuing this report every year because, as a member of the community, you should want to know what a non-profit hospital, dedicated to service, has accomplished during the past year, what its improvements have been, how it stands now—yes, and what you can do to help improve its service to others and to yourself.

There are several pages of figures and charts in this report. If you take the trouble to read them, as I hope you will, I think you will find they tell an interesting and important story. But no compilation of statistics can truly picture the lives saved, the suffering relieved and the hundreds of families, rich and poor alike, made happy through the work of the hospital. Just as statistics alone cannot tell the full story of a hospital's service, neither can a balance sheet properly appraise its most valuable assets.

We have gathered together on our Staff doctors, nurses, and technicians who form a distinguished medical group known throughout the country. The modern equipment available at St. Luke's enables this group to serve not only the people of Chicago but, as the record shows, to make valuable advances in medical knowledge and science.

Today, however, the hospital needs many things to maintain its excellent standing; to keep pace with the demands of our normal needs and the National Defense Program; and, equally important, to prepare ourself for the greater tasks we must inevitably meet tomorrow. To this end we have already made plans for the building of a Greater St. Luke's. This program is outlined on page 23.

I want to express my gratitude and appreciation to every person connected with the hospital for serving so loyally and so well. I want especially to thank the Board of Trustees, the Medical Staff and The Woman's Board for their devoted interest to the welfare of the hospital. A splendid example has marked the path to be followed toward the Greater St. Luke's.

Charles St. Schnur

President

April 16, 1941

BOARD OF TRUSTEES—1941

President, CHARLES H. SCHWEPPE, (deceased)

First Vice President, A. WATSON ARMOUR, 221 N. La Salle St.

Second Vice President, JOSEPH T. RYERSON, 135 S. La Salle St.

Secretary, CHAUNCEY B. BORLAND, 105 S. La Salle St.

Asst. Secretary, WALTER B. SMITH, 50 S. La Salle St.

Treasurer, L. L. McARTHUR, JR., 50 S. La Salle St.

Asst. Treasurer, JOHN C. SMITH, 50 S. La Salle St.

Director, C. A. WORDELL, 1439 S. Michigan Ave. (Resigned)

Asst. Director, A. P. MERRILL, M.D., 1439 S. Michigan Ave.

TERMS EXPIRE 1942

WALTER B. SMITH

MRS. JOHN W. GARY

ALBERT H. WETTEN

STERLING MORTON

BRITTON I. BUDD

C. JOHN WHIPPLE

TERMS EXPIRE 1943

CYRUS H. ADAMS, JR.

A. WATSON ARMOUR

REV. DUNCAN H. BROWNE

L. L. McARTHUR, JR.

DAVID EVANS

C. WARD SEABURY

MRS. WALTER B. WOLF

CHARLES H. SCHWEPPE

TERMS EXPIRE 1944

CHAUNCEY B. BORLAND

SAMUEL INSULL, JR.

JOSEPH T. RYERSON

JOSEPH A. CAPPS, M.D.

CHARLES F. GLORE

THOMAS J. CARNEY

A. WATSON ARMOUR

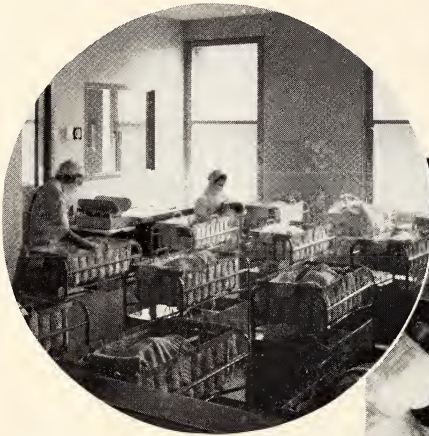


JOSEPH T. RYERSON





MICROSCOPIC EXAMINATION IN THE
CLINICAL LABORATORY



TENDING INFANTS IN THE
MATERNITY NURSERY

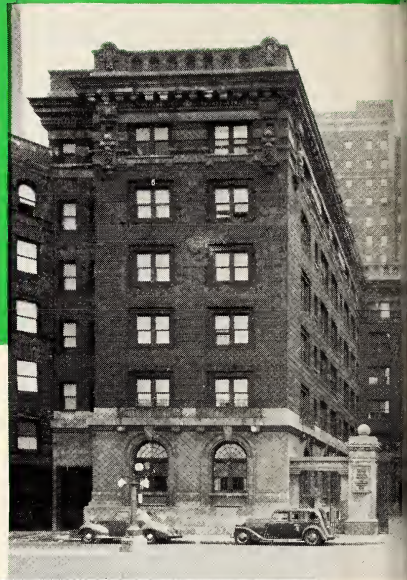


OPERATING ROOM TEAM AT
WORK



ACCOMODATIONS IN
NEURO-PSYCHIATRIC
DEPARTMENT

PICTURES AROUND



D THE HOSPITAL



SPECIAL HEART STUDIES WITH
ELECTRO-CARDIOGRAM TRACINGS



ADJUSTING THE PRICELESS
RADIUM CAPSULES FOR TREAT-
MENTS



UNDER THE EYE OF THE
X-RAY

REGISTRATION OF PA-
TIENTS IN THE CLINIC



St. Luke's Progress in 1940

BY CHARLES A. WORDELL, DIRECTOR

PERHAPS the easiest and best way of reporting to the friends of St. Luke's on our progress during the past year is to list the various changes made. But first a word of explanation.

1940 was a banner year for St. Luke's not only because of the improvements made in the present plant but because of the progress made in plans for a "Greater St. Luke's." Final plans for the proposed new Nurses' Home were approved by the Building Committee and over \$450,000 of the \$650,000 needed for the building has been raised.

The following changes were made with three things in mind: To train more doctors and more nurses to meet the ever-increasing demand; provide more facilities to care for both free and pay patients; expand our present facilities for Out-Patient services.

Steps Taken

Accordingly, the following steps were taken:

A Nurses' Infirmary was established. This centralized the health services available for employees and nurses and enables us to care for our assistants with a maximum of efficiency.

Health services for employees were expanded. In addition to providing hospital care for present employees, this new arrangement provides for a complete physical examination of new employees before they are placed on the payroll.

Private and semi-private accommodations were enlarged by opening another

floor of Main Building. This increased our bed capacity from 435 to 471.

Two new Research Laboratories were opened to the resident and attending staff. The Martha Borland Laboratory for Surgical Research was opened on Main 16 and a Medical Research Laboratory was set up on Main 17.

A three-year residency plan was inaugurated for post-graduate medical students. This program meets the requirements of the various American medical specialty boards.

An Oxygen Therapy Department was established.

The Out-Patient Laboratory facilities were expanded.

A blood serum bank was set up at the hospital.

Facilities on the Pediatric Floor were increased.

Additional space was made available to members of the staff for teaching purposes.

An extensive redecorating program was inaugurated by the hospital. It is being completed at the present time.

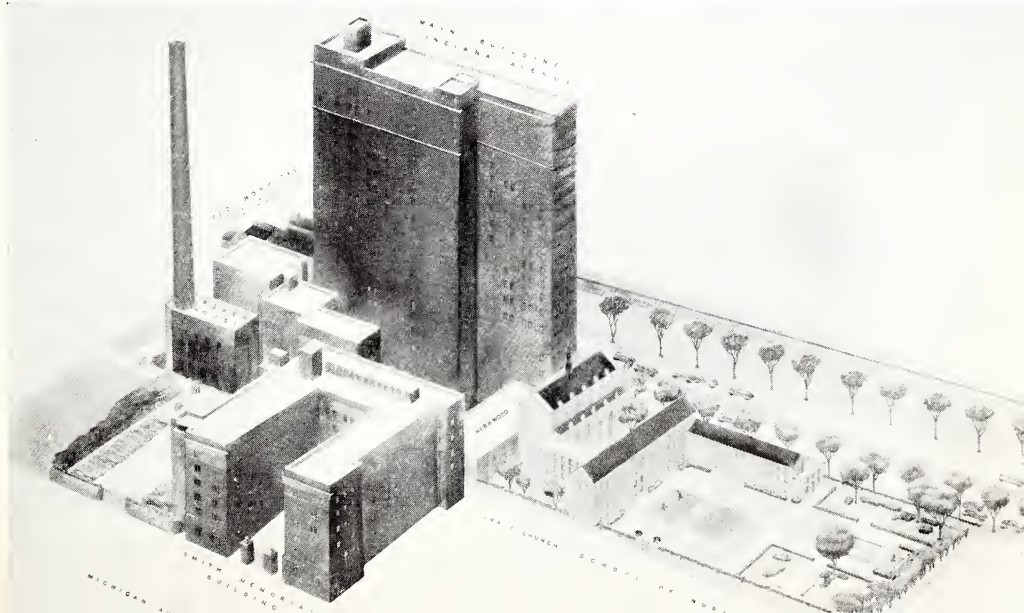
In addition to these, many other necessary changes were, of course, made. We believe these are the most important and indicative of our progress.

With the continued cooperation of the Board of Trustees, Medical Staff, Woman's Board and all of the other people associated with the hospital, it is evident that the 1941 annual report will show St. Luke's well on its way to becoming not only a bigger, but a greater and better hospital.

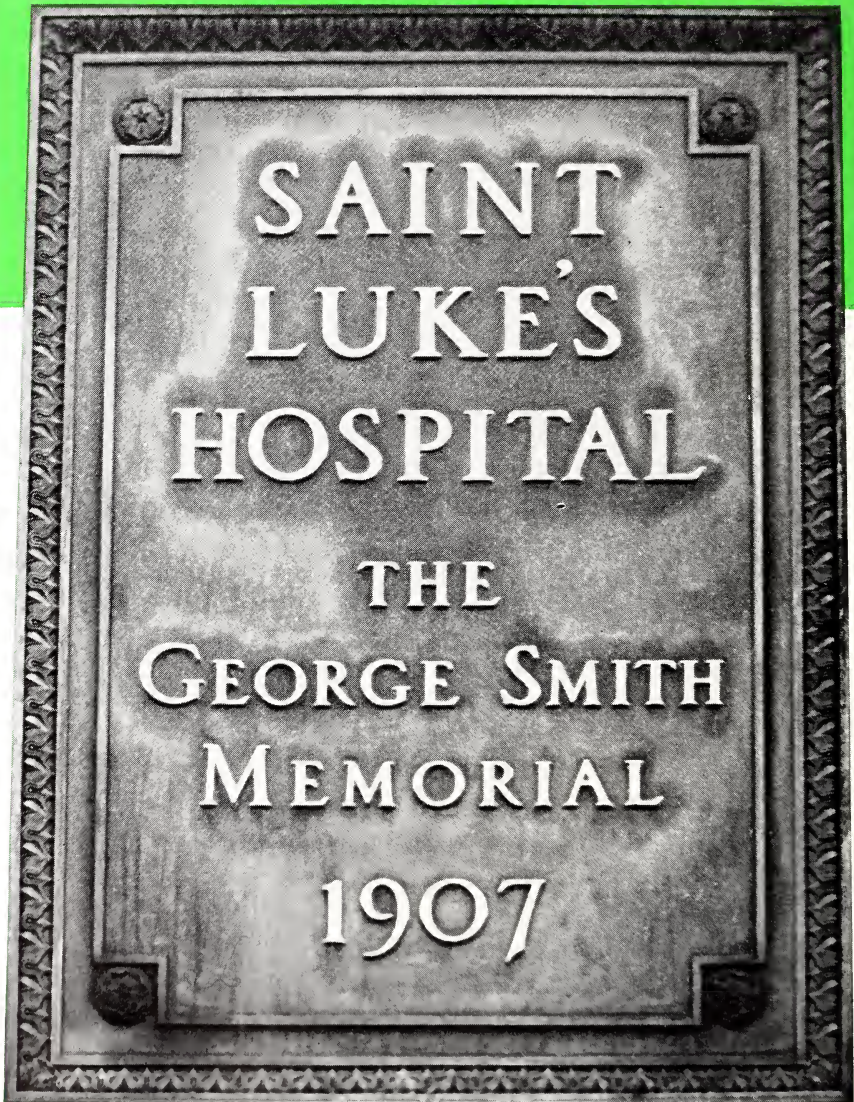
What St. Luke's Needs

(1)	School of Nursing, including 425-bed Nurses' Home.....	\$1,125,000
	Unit I—Nurses' Home.....	\$650,000
	Unit II—addition to Home.....	175,000
	Unit III—addition to Home and additional educational facilities	300,000
(2)	Service Building, 12 stories and basement.....	1,110,000
	Unit I—administrative offices, medical services, residents' and internes' quarters, dining rooms, kitchens.	750,000
	Unit II—addition to accommodate medical services.	180,000
	Unit III—addition to accommodate additional internes	60,000
	Unit IV—addition for increased requirements of medical services	120,000
(3)	Out-Patient Building	350,000
(4)	Remodel three floors of Main to accommodate eighty private patients, at \$25,000 per floor.....	75,000
(5)	Remodel three floors of Main to accommodate 115 patients, ward services	60,000
(6)	Boiler and Engine Room Addition.....	150,000
	Total needed for plant expansion and improvement.....	<u>\$2,870,000</u>
	Needed to bring endowment to total of \$5,000,000.....	3,764,444

THE GREATER ST. LUKE'S



THE *Gift* LIVES ON

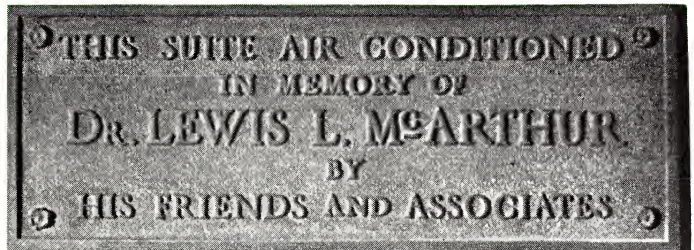


The George Smith Memorial Building has been providing the finest in hospital accommodations to Chicagoans since 1907. It has also made available additional space for patients desiring lower priced rooms.



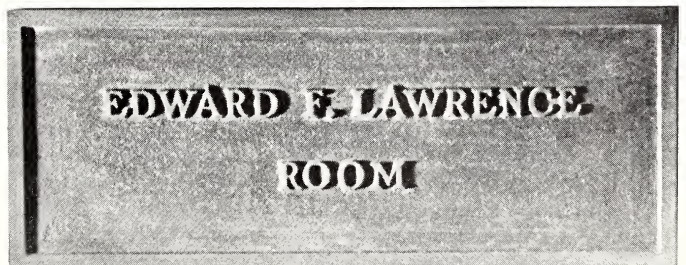
Because he believed that persons visiting a hospital are depressed by the usual atmosphere, Charles H. Schweppe arranged to have the lobby of Smith Memorial Building redecorated. The lobby's cheerful color and gay furniture will cheer many persons for many years to come.

The gift in memory of Dr. Lewis L. McArthur makes possible air-conditioned operating rooms where the chances of infection are immeasurably reduced.



For many tomorrows will the Ryerson floor serve others by providing inexpensive, cheerful, semi-private and private rooms for patients.

Another memorial room that lives in service to many Chicagoans is the two-bed, Edward Lawrence room. The management will gladly furnish information regarding such bequests.



Medical Staff Activities During 1940

BY SELIM W. McARTHUR

President, Medical Staff

A GAIN it is my privilege to submit a report of the Medical Staff of St. Luke's Hospital showing the present organization of the Staff and the changes which have occurred during the year 1940.

The present Medical Staff, as of January 1, 1941, is made up of the following:

Honorary members	9
Senior Attending members	55
Associate Attending members	41
Assistant Attending members	32
Adjunct members	24
Total members	<u>161</u>

To this should be added a group of younger men who are serving a probationary period as physicians and surgeons, etc., in the Out-Patient Department. These number 31.

Following is a summary of changes and additions during 1940:

Drs. Arthur R. Elliott, J. A. Capps, Robert W. Keeton, Edwin W. Ryerson and Louis E. Schmidt were promoted to rank of active senior attending consultants in their respective departments. Drs. Edward S. Holmblad, John D. Ellis, C. G. Shearon were promoted to Senior Surgeons. Drs. T. J. Coogan, C. F. G. Brown, Fred Ball, Carl Johnson were promoted to Senior Physicians. Dr. Alfred P. Solomon was promoted to Senior Neurologist. Drs. Howard Wakefield and Richard B. Capps were promoted to Associate Physicians. Drs. John T. Reynolds and Cornelius Haggerty were elected Assistants in Surgery. Dr. William Geittman was elected Assistant Gynecologist. Dr. W. A. Gustafson was elected Assistant in Neuro-



Surgery. Drs. Benjamin Boshes, Henry C. A. Mead were elected Assistants in Neuropsychiatry. Dr. William Raim elected Assistant in Orthopedics. Drs. Chester Coggeshall, Walter Tobin, B. R. Bancroft, J. M. Donegal, Paul Griffith were added to Adjunct Staff.

Drs. Ralph MacDonald, Frank Kendrick, Marcus Hobart have withdrawn from the Staff.

During the year 1940 the two year internship has been put in full operation and since July 1st, 13 paid residencies have been established.

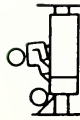
In conclusion, I feel certain that I voice the sentiments of the entire Staff when I state that great satisfaction is felt by all in the many accomplishments and improvements achieved by our hospital this past year. I desire to express to Board of Trustees and other organizations within the hospital, the deep appreciation of the staff for your splendid cooperation, interest and efforts for St. Luke's welfare.

INCOME AND EXPENDITURES

PICTORIAL ANALYSIS

INCOME

Care of Patients



\$672,337.02

Departmental Care



\$375,364.99

Endowments and Bequests



\$45,516.63

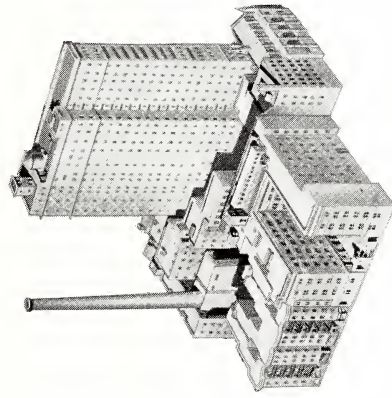
Donations, etc.



\$29,134.81

TOTAL
INCOME

\$1,122,353.45



EXPENSES

Administration



\$127,966.83

Maintenance and Repairs



\$97,881.09

House and Property



\$84,756.39

School of Nursing



\$122,642.67

Department Expenses



\$266,872.70

Care of Patients



\$421,444.53












TOTAL
EXPENSES

\$1,121,564.21

NET INCOME
\$789.24

OUT-PATIENT SERVICES

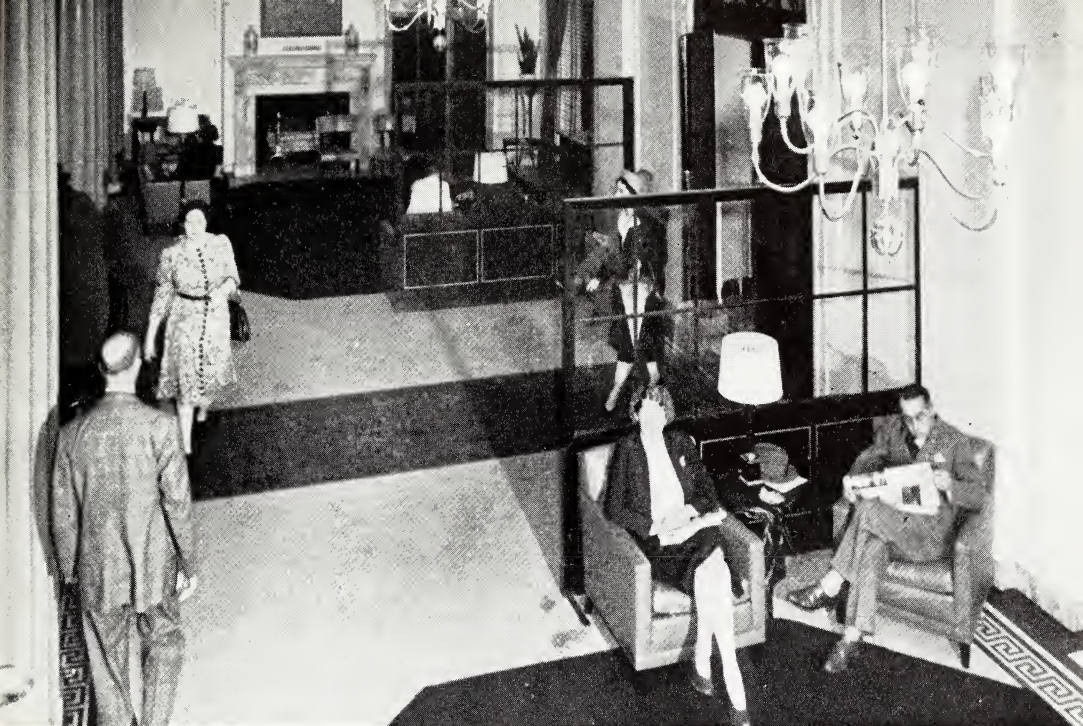
VISITS IN 1940

MEDICAL CLINICS	11,486	
SURGICAL CLINICS	4,715	
PEDIATRIC CLINIC	8,193	
GYNECOLOGICAL OBSTETRICS CLINIC	8,788	
X-RAY CLINIC	619	
PHYSIO-THERAPY CLINIC	311	
EYE, EAR, NOSE & THROAT	6,447	
NEUROLOGICAL CLINIC	2,081	
DERMATOLOGICAL CLINIC	6,142	
ORTHOPEDIC CLINIC	3,199	
ALL OTHER	5,409	








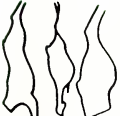

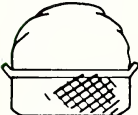


(Each figure represents 1,000)

Waiting-room in Out-Patient Department





Newly decorated lobby of Smith Memorial Building

AVERAGE DAY AT ST. LUKE'S			
OPERATIONS  20 PER DAY	BIRTHS  3 PER DAY	X-RAY PATIENTS AND TREATMENTS  50 PER DAY	PHYSIO-THERAPY  31 PER DAY
PATIENTS  334 PER DAY	MEALS  2650 PER DAY	ADMISSIONS  36 PER DAY	MEAT  790 LB. PER DAY
MILK  180 GAL. PER DAY	LAUNDRY  4 TONS PER DAY	FUEL  30 TONS PER DAY	SOCIAL SERVICE DEPT. VISITS  156 PER DAY

ARTHUR ANDERSEN & CO.

120 SOUTH LA SALLE STREET
CHICAGO

*To the Trustees of
St. Luke's Hospital:*

We have examined the balance sheet of ST. LUKE'S HOSPITAL (an Illinois corporation organized not for profit) as of December 31, 1940 and the statements of income and expenses and changes in funds for the year ended that date. In connection therewith, we have examined or tested accounting records of the hospital and other supporting evidence and have reviewed the system of internal control and the accounting procedures of the hospital by methods and to the extent we deemed appropriate. Our detailed audit was limited to test-checks of certain transactions, mainly for one month of the year.

The accompanying statements reflect the segregation of assets of the various funds as made by officials and counsel of the hospital, after a study of the available documents relating to bequests and endowments, and recorded on the books of the hospital during the year 1934. Our examination did not include a review of these documents. Income from endowments has been allocated between designated and general purposes in accordance with this segregation and is stated on a basis consistent with that of prior years.

On the basis of accepting the segregation of assets and allocation of income as set forth in the preceding paragraph, in our opinion the accompanying balance sheet and related statements of income and expenses and changes in funds, subject to the notations thereon, fairly present the financial position of St. Luke's Hospital at December 31, 1940 and the results of its operations for the year ended that date, in conformity with generally accepted accounting principles maintained by the hospital on a basis consistent with that of the preceding year.

ARTHUR ANDERSEN & CO.

Chicago, Illinois,
April 16, 1941.

ST. LUKE'S HOSPITAL

(AN ILLINOIS CORPORATION ORGANIZED NOT FOR PROFIT)

Balance Sheet - December 31, 1940

ASSETS

GENERAL AND PLANT FUND ASSETS:

Current assets—			
Cash in bank and on hand.....		\$ 11,360.03	
Accounts receivable—			
Patients (excluding \$61,856.84 in hands of collectors fully reserved for).....	\$ 120,488.45		
Other.....	10,643.54		
	<u>\$ 131,131.99</u>		
Less—Reserve for doubtful accounts.....	27,082.80	104,049.19	
Accrued interest receivable on all investments.....		6,721.29	
Inventories of stores and supplies, at cost which was not in excess of market.....		36,332.72	
Cash representing unused portion of income received on special funds and donations held for special purposes—			
With custodian of endowment funds.....	\$ 4,958.96		
In treasurer's bank account.....	4,753.38	9,712.34	
	<u>\$ 9,712.34</u>		\$ 168,175.57
Total current assets.....			
Deferred charges and prepaid expenses—			
Building rehabilitation expense, in process of amortization over a period of five years.....		\$ 116,888.49	
Unexpired insurance premiums, etc.....		7,855.90	
		<u>\$ 124,744.39</u>	
Total deferred charges and prepaid expenses.....			
Plant assets, at book values—			
Land and buildings.....	\$4,302,759.34		
Less—Reserve for depreciation of buildings—see Note 1.....	182,733.42	\$4,120,025.92	
Equipment.....	\$ 450,408.31		
Less—Reserve for depreciation.....	372,109.39	78,298.92	
	<u>\$ 4,198,324.84</u>		
Total plant assets.....			
Amounts due from other funds—			
Unrestricted investment fund.....		\$ 3,200.00	
Endowment fund.....		493.08	3,693.08

ARTHUR ANDERSEN & Co.

120 SOUTH LA SALLE STREET
CHICAGO

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Chicago, Illinois,
April 16, 1941.

ST. LUKE'S HOSPITAL

(AN ILLINOIS CORPORATION ORGANIZED NOT FOR PROFIT)

Balance Sheet - December 31, 1940

ASSETS

GENERAL AND PLANT FUND ASSETS:

Current assets—			
Cash in bank and on hand		\$ 11,360 03	
Accounts receivable—			
Patients (excluding \$61,856.84 in hands of collectors fully reserved for).	\$ 120,488 45		
Other	10,643 54		
	\$ 131,131 99		
Less—Reserve for doubtful accounts	27,082 80	104,049 19	
Accrued interest receivable on all investments		6,721 29	
Inventories of stores and supplies, at cost which was not in excess of market		36,332 72	
Cash representing unused portion of income received on special funds and donations held for special purposes—			
With custodian of endowment funds	\$ 4,958 96		
In treasurer's bank account	4,753 38	9,712 34	
Total current assets			\$ 168,175 57
Deferred charges and prepaid expenses—			
Building rehabilitation expense, in process of amortization over a period of five years		\$ 116,888 49	
Unexpired insurance premiums, etc		7,855 90	
Total deferred charges and prepaid expenses			124,744 39
Plant assets, at book values—			
Land and buildings	\$4,302,759 34		
Less—Reserve for depreciation of buildings—see Note 1	182,733 42	\$4,120,025 92	
Equipment	\$ 450,408 31		
Less—Reserve for depreciation	372,109 39	78,298 92	
Total plant assets			4,198,324 84
Amounts due from other funds—			
Unrestricted investment fund	\$ 3,200 00		
Endowment fund	493 08	3,693 08	
Total general and plant fund assets			\$4,494,937 88

UNRESTRICTED INVESTMENT FUND ASSETS:

Cash in bank		\$ 32,528 28	
Investments, at book values—			
Bonds (quoted market value \$29,152.80) of which \$14,446.50 are in default—see Note 2	\$ 42,276 62		
Stocks (quoted market value \$159,122.24)	129,309 48	171,586 10	
Undivided fractional interest in Chicago real estate		69,978 79	
		\$ 274,093 17	
Amount due from general and plant fund, loan		1,317 98	
Total unrestricted investment fund assets			275,411 15

ENDOWMENT FUND ASSETS:

Cash in banks		\$ 21,282 87	
Investments, at book values—			
Bonds (quoted market value \$695,859.12) of which \$76,310.88 are in default—see Note 2	\$ 770,988 69		
Stocks (quoted market value \$239,519 88)	241,143 22	1,012,131 91	
Radium, at adjusted cost not in excess of market value		3,047 50	
Land, 19-25 West Wacker Drive, Chicago, at book value		180,000 00	
Farm land, at book value		7,000 85	
Interests in various estates, at nominal values		3 00	
		\$1,223,466 13	
Amounts due from other funds—			
General and plant fund, earnings (net) from use of radium in 1940	\$ 477 43		
Unrestricted investment fund, loan	12,105 74	12,583 17	
Total endowment fund assets			1,236,049 30

NEW NURSES' HOME FUND ASSETS:

Cash in bank		\$ 5,000 00	
Investment—300 shares of Montgomery Ward & Company, Incorporated Class A preferred stock, at book value (quoted market value \$48,225.00)		50,568 00	
Amount due from general and plant fund		5,000 00	
Total new nurses' home fund assets			60,568 00
			\$6,066,966 33

LIABILITIES

GENERAL AND PLANT FUND:

Current liabilities—			
Trade creditors	\$112,257 34		
Patients' accounts receivable credit balances	6,665 99		
Accrued interest on mortgage note	3,750 00		
Accrued taxes and other liabilities	19,876 49	\$142,549 82	
Payment on mortgage note made April 1, 1941		25,000 00	
Unused portion of income received on special funds and donations held for special purposes (per contra)		9,712 34	
Amounts due other funds—			
New nurses' home fund	\$ 5,000 00		
Unrestricted investment fund loan	1,317 98		
Endowment fund, earnings (net) from use of radium in 1940	477 43	6,795 41	
Total current liabilities			\$ 184,057 57
Mortgage note, 4½% due April 1, 1941 (maturity extended to April 1, 1944), secured by first mortgage on real estate improved with hospital buildings, less payment of \$25,000.00 made April 1, 1941 shown above under current liabilities		350,000 00	
General and plant fund balance, per accompanying statement		3,960,880 31	
Total general and plant fund and liabilities thereof			\$4,494,937 88

UNRESTRICTED INVESTMENT FUND:

Amounts due other funds—			
General and plant fund	\$ 3,200 00		
Endowment fund, loan	12,105 74	\$ 15,305 74	
Unrestricted investment fund balance, per accompanying statement		260,105 41	
Total unrestricted investment fund and liabilities thereof			275,411 15

ENDOWMENT FUND:

Amount due general and plant fund	\$ 493 08		
Endowment fund balance, per accompanying statement	1,235,556 22		
Total endowment fund and liabilities thereof			1,236,049 30

NEW NURSES' HOME FUND:

New nurses' home fund balance, per accompanying statement		60,568 00	
		\$6,066,966 33	

NOTES

- 1 The reserve for depreciation of buildings includes provisions for depreciation through the year 1912 only; no provisions have been recorded on the books subsequent to that year.
- 2 Investments are stated at amounts carried on the books without regard to the decrease which would occur were such assets recorded at the lower of book values or market.
- 3 Bonds having a book value of \$40,898.89 (quoted market value \$40,131.73) and cash of \$49.80 included in endowment fund assets are also recorded on the books and balance sheet of the Lamen Committee as assets of that organization. Other than these bonds and cash, assets of organizations which function in connection with the activities of the hospital are not included in the above balance sheet.
- 4 Uncollected subscriptions to the Greater St. Luke's Campaign Fund in the aggregate amount of \$53,898.93, as shown by the records of the hospital, are not included in this balance sheet.

CHANGES IN FUNDS

During the Year Ended December 31, 1940

GENERAL AND PLANT FUND

BALANCE AT DECEMBER 31, 1939.....		\$3,915,792.98
ADD:		
Net income for year ended December 31, 1940 per accompanying summary.....	\$ 789.24	
Donations for capital purposes and building rehabilitation (including \$4,069.69 transferred from endowment fund).....	19,678.81	
Amount transferred from unrestricted investment fund for building rehabilitation.....	24,619.28	45,087.33
BALANCE AT DECEMBER 31, 1940.....		<u>\$3,960,880.31</u>

UNRESTRICTED INVESTMENT FUND

BALANCE AT DECEMBER 31, 1939.....		\$ 259,241.77
ADD:		
Bequests received—		
Mary Mitchell Ryerson Estate.....	\$16,500.00	
Grace W. Barrell Estate—additional.....	4,000.00	
Evelyn English Estate—additional.....	16.67	\$20,516.67
Donation received from the Grace W. Barrell Trust		2,750.00
Collection on Greater St. Luke's Campaign Fund		
pledge.....	1,500.00	
Net profit on disposition of securities.....	716.25	25,482.92
		<u>\$ 284,724.69</u>
DEDUCT—Amount transferred to general and plant fund for building rehabilitation.....		24,619.28
BALANCE AT DECEMBER 31, 1940.....		<u>\$ 260,105.41</u>

ENDOWMENT FUND

BALANCE AT DECEMBER 31, 1939.....		\$1,234,870.73
ADD:		
Net profit on disposition of securities.....	\$ 910.68	
Life membership.....	1,000.00	
Net income from use of radium in 1940.....	477.43	
Donations received—		
Mrs. Robert C. Wheeler (for a charity ward bed).....	\$ 5,000.00	
Others.....	410.24	5,410.24
		<u>7,798.35</u>
		<u>\$1,242,669.08</u>
DEDUCT:		
Excess of annuity obligation paid over income from James Nelson and Anna Louise Raymond Fund.....	\$ 3,042.17	
Transfer to general and plant fund of accumulated net income from use of radium to December 31, 1939 (for purchase of X-Ray equipment).....	4,069.69	
Nominal value at which Mary Mitchell Ryerson Estate had been recorded on the books.....	1.00	7,112.86
BALANCE AT DECEMBER 31, 1940.....		<u>\$1,235,556.22</u>

NEW NURSES' HOME FUND

DONATIONS RECEIVED IN 1940:		
Mrs. John G. Shedd.....		\$ 50,568.00
Mrs. Charles F. Glore.....		5,000.00
The Woman's Board.....		5,000.00
BALANCE AT DECEMBER 31, 1940.....		<u>\$ 60,568.00</u>

CONDENSED STATEMENT of INCOME and EXPENSES

For the Year Ended December 31, 1940

<u>PARTICULARS</u>	<u>Amount</u>
OPERATING REVENUES:	
Board and room of patients	\$ 672,337 02
Departmental services	375,364 99
Total operating revenues	\$1,047,702 01
OPERATING EXPENSES:	
Professional expenses	\$546,283 28
Nonprofessional expenses	343,565 24
Training school for nurses	122,642 67
Total operating expenses	1,012,491 19
Net operating income, before provisions for depreciation, amortization, etc	\$ 35,210 82
NONOPERATING INCOME:	
Income from endowment fund and unrestricted investment fund assets	\$52,249 59
Less—Cash income for annuity and other designated purposes	6,732 96
Income from Daniel B. and Louise M. Shipman Charity Trust Fund	9,375 08
Donations, exclusive of \$2,265.78 received for special funds and \$19,678.81 for capital purposes, etc.	16,785 97
Store rentals, discounts, etc.	2,973 76
Total nonoperating income	74,651 44
	\$ 109,862 26
PROVISIONS FOR DEPRECIATION, AMORTIZATION, ETC.:	
Provision for depreciation of equipment—see Note 1	\$ 34,800 00
Amortization of deferred building rehabilitation expense	36,900 00
Provision for doubtful accounts	20,589 84
Interest on mortgage note	15,000 00
Provision for real estate taxes on vacant Indiana Avenue property	1,783 18
Total	109,073 02
Net income	\$ 789 24

NOTES:

- (1) The net income, as shown above, has been determined after deducting a provision of \$34,800.00 for depreciation of hospital equipment but no provision for depreciation of buildings has been made by the hospital.
- (2) Income and expenses of organizations and committees which function in connection with the activities of the hospital are not included in the above statement

Nursing Progress in 1940

BY MADELEINE McCONNELL

Director of Nursing

The year 1940 was a busy one for the Department of Nursing Education and Nursing Service. The average patient census in the hospital in 1939 was 301; in 1940 it increased to 334, with a decided upward trend at the close of the year.

The Nursing Council. In March the Nursing Council voted to increase the tuition from \$165.00 to \$200.00. The Council also approved the giving of individual awards to five outstanding members of the graduating class. A \$300.00 scholarship was given to Miss Kathryn Beuchat, head nurse in obstetrics for full time attendance at the University of Chicago for the fall quarter. The Council contributed to the actual expenses of the Nursing Department as follows:

Fund for salary.....	\$1715.00
Student awards and scholarship for faculty members..	400.00
Equipment and allotment for social activities.....	1102.74
	\$3217.74

School of Nursing. Nearly 2100 nurses have now graduated from the St. Luke's Hospital School of Nursing.

Faculty. There are 24 members of the administrative, supervising and teaching staff and 21 head nurses. One head nurse has been added to take care of the new infirmary. Two faculty members were on leave of absence to carry university work in Advanced Nursing Education. Nine carried part time university work.

Main Thirteen has been converted into a very fine health clinic and infirmary for nurses, and a nursing arts laboratory. This was made possible by the

vision and liberal gifts secured by Dr. Fred E. Ball, the generosity of the Board of Trustees, the planning of both the health and educational departments.

The School was inspected in October by the accrediting committee of the National League of Nursing Education. The committee stated that a report of the visit would be sent early in the ensuing year. (The School has been accredited).

The Cooperative Government Association:—A joint faculty-student committee drew up the Constitution and By-laws which were approved by the Nursing Council in April. The first meeting of the Association being held in May. The purpose of the Council is to provide student government with faculty participation, for certain social activities.

The Residences—Stickney and the Saranacs were redecorated. The Woman's Board took the responsibility for redecorating and furnishing the Stickney living rooms, the faculty sitting room, and guest room in the Main Building. Mrs. Stanley Keith refurnished the social rooms on Main 12. Plans for the new Nurses' Residence, so greatly needed, are now well under way.

Nursing Service must go hand in hand with Nursing Education in order to constantly improve the efficiency of the service and to care for the added number of patients.

Plans for 1941

We look forward to 1941 with plans for the future. We need to develop a better integrated plan of classroom in-

ST. LUKE'S NEWS

struction and ward teaching. We need to add some necessary equipment to our wards which will insure safer nursing care. The overcrowding of our big wards offers definite problems. All tendencies point to a rising census which will mean keeping our school up to the present number at least and an increase in our general duty group. With the National Defense Program well under way

we anticipate a shortage of professional nurses; (four of our nurses have joined the Federal Service and many have accepted positions in National Defense Industries) therefore, our 1941 plans call for additional maids and orderlies on the nursing service.

The department wishes to thank all those who contributed so generously to the work of the year.

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Isolde Stoye
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The Woman's Board

BY MRS. JOHN W. GARY, PRESIDENT

SEVENTY-SIX years of active work! That is the record of The Woman's Board, and we feel that we may call it an enviable one. Our name has been changed many times but never our purpose.

The major activity of the Board is the financing of the Social Service and Out-Patient Departments. In 1940 there were 57,390 clinical visits.

The Woman's Board also finances the Linen, Occupational Therapy, Nurses', Kindergarten, Clothing and Layette Committees.

So often we are asked: "How do you raise the money for all this financing?" We answer proudly: "Through our Fashion Show." In 1940 we held our Fourteenth Show, raising \$33,257.80 net, making a total net for the fourteen years of \$405,014.96.

St. Luke's Hospital Shop was established two years ago. The tea room and gift shop have proved to be of tremendous service to the hospital.

The Furnishing Committee cooperates with the Trustees in rehabilitating various rooms in the hospital.

Social activities of the School of Nursing, together with awards to members of the graduating class, are arranged and supported by The Woman's Board, who also furnish flowers and decorations for special events.

The vitally-needed new Nurses'



SERVICE IN OUT-PATIENT DEPT.

Home is receiving the earnest consideration of each member of the Board.

Members of The Woman's Board (see opposite page) consist of three Honorary, three Senior and sixty-two Active members.

Of the fifteen years that I have been President, I feel that 1940 was our banner year, and the success which attended our efforts was made possible only by the willing cooperation and assistance of each devoted member.

Tuesday, October 21st
ST. LUKE'S FASHION SHOW

Grand Ballroom — Stevens Hotel
Proceeds provide free hospital care for sick and needy
For information call Central 9036

THE WOMAN'S BOARD OF ST. LUKE'S HOSPITAL

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Gen. Robert E. Wood

MISCELLANEOUS MEMBERS

Fred Ascher
The Misses Fairman

Thomas W. Hinde
William S. Miller

Miss Dorothy Stirling
James E. Tucker

Got a Story?

A famous magazine editor once said: "Every person has a story—it's just a matter of getting him to write it."

This is just our way of reminding all readers of THE NEWS that material submitted for publication is always welcome. Naturally, because of the relatively small size of the magazine, the amount of material that can be used is limited.

Fact or fiction, poetry or prose, special articles, cartoons, etc.—all are welcome. Just mail them or bring them to the Public Relations Department at St. Luke's Hospital.

THE LIGHTER SIDE

Pat was coming out of ether.

"Gosh," he groaned, "I'm glad that's over."

"I don't know," said his neighbor. "They left a roll of gauze in me and had to open me again."

"Yeah," came a voice from another bed. "They left a pair of scissors in me."

Just then Pat's doctor came down the hall shouting: "Has anyone seen my hat?"

Pat fainted.

The Cover Picture

Readers who saw the September 1st issue of Vogue will recognize the picture on our cover this month. It is reproduced through the courtesy of Conde Nast Publications. Miss Mary Ryerson is the girl and she is wearing the latest in fall fashions—our first preview of the St. Luke's Fashion Show.

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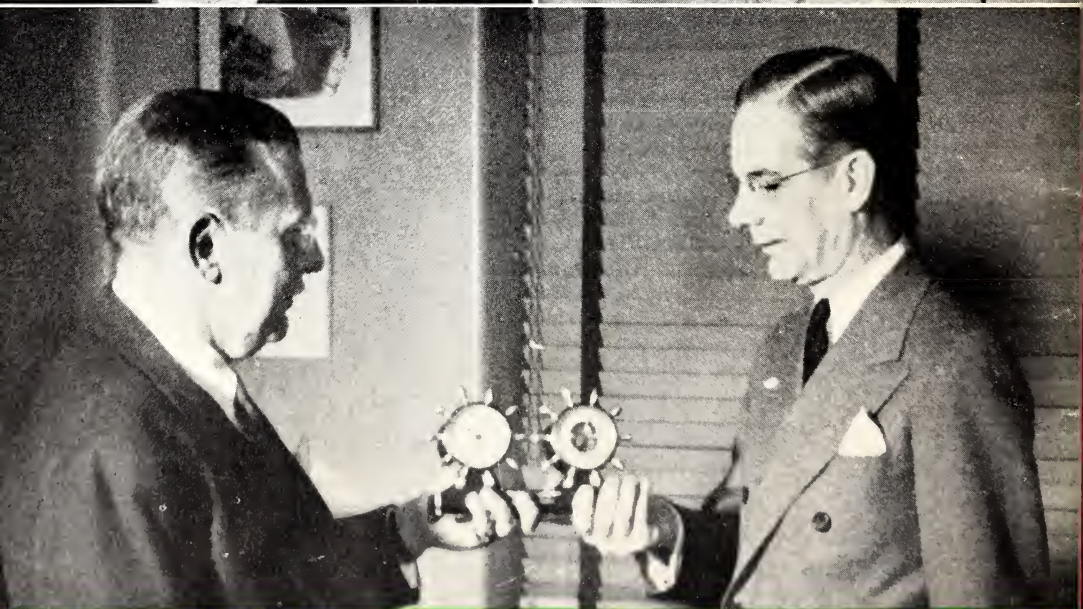
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MRS. WALTER B. WOLF
CHAIRMAN, FASHION REVUE



MRS. JOHN W. GARY
PRESIDENT, THE WOMAN'S BOARD



DR. MCARTHUR PRESENTING A GOOD-BYE GIFT TO CHARLES WORDELL

St. Luke's NEWS

Stork's-Eye View

by

James A. Gough, M.D.

Baby Pictures

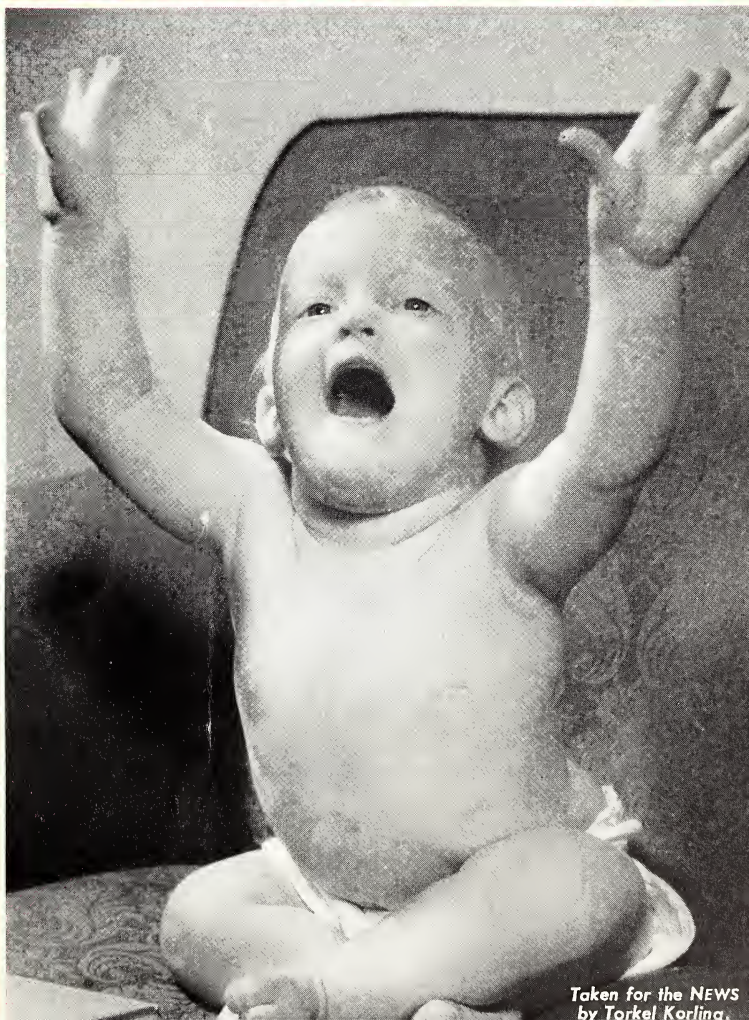
by

Torkel Korling

Holding a Baby

by

Heywood Broun



November 1941

Taken for the NEWS
by Torkel Korling.

Thanksgiving

TIME out of mind at this turn of the seasons when the hardy oak leaves rustle in the wind and the frost gives a tang to the air and dusk falls early and the friendly evenings lengthen under the heel of Orion, it has seemed good to our people to join together in praising the Creator and Preserver, who has brought us by a way that we did not know to the end of another year. In observance of this custom, I appoint Thursday, the twenty-sixth of November, as a day of Public Thanksgiving for the blessings that have been our common lot and have placed our beloved State with the favored regions of earth—for all the creature comforts: the yield of the soil that has fed us and the richer yield from labor of every kind that has sustained our lives—and for all those things, as dear as breath to the body, that quicken man's faith in his manhood, that nourish and strengthen his spirit to do the great work still before him: for the brotherly word and act; for honor held above price; for steadfast courage and zeal in the long, long search after truth; for liberty and for justice freely granted by each to his fellow and so as freely enjoyed; and for the crowning glory and mercy of peace upon our land—that we may humbly take heart of these blessings as we gather once again with solemn and festive rites to keep our Harvest Home.



Given under my hand and seal of the State at the Capitol, in Hartford, this twelfth day of November, in the year of our Lord one thousand nine hundred and thirty-six and of the independence of the United States the one hundred and sixty-first.

WILBER L. CROSS

A Stork's-Eye View

BY JAMES A. GOUGH, M.D.
Senior Attending Obstetrician

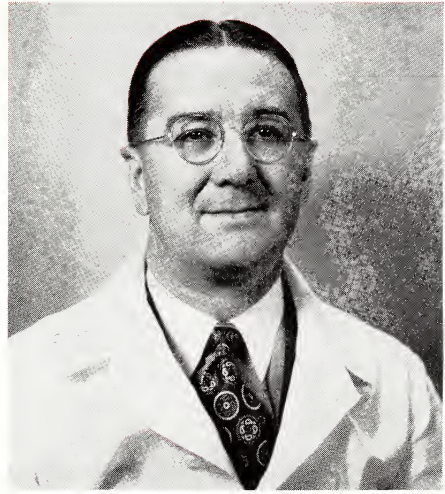
THE tempo of modern life with its concentration of population in large centers and the restriction of "living room," the demands for greater efficiency and the wide-spread dissemination of knowledge place a premium on our most essential asset—life itself.

Institutions that traffic in this priceless product must be better than good, and small wonder is it that the modern hospital forms such a sturdy bulwark against the ravages of our greatest enemies—illness and death.

An earlier issue of *The News* contained a description and pictures of the new maternity floor in Smith Building as it appears to the lay visitor—its pleasant, cheerful atmosphere, the color scheme, the excellent new equipment. A stork's-eye view of the beautiful new nursery was glimpsed through the plate-glass in the corridor, and the proud occupants of this special domain acclaimed with lusty voices their enthusiasm for life at an early age.

These features have their sales appeal and convey some idea of the workings of this department, but back of the gleaming equipment and more vital than all its physical fittings are intangible forces that keep the wheels of health turning in this spotless domain.

If it is true that human life is most precarious in its beginning, it is equally, and gratifyingly, true that the greatest advances in the conservation of life are being made today in this very field. It is necessary to emphasize the fact that only in very recent times has science applied here the many new inventions and



methods which we in a decade or two have come to accept as indispensable in maternal and neo-natal care.

Many factors contributed to a lag in interest and progress in this work, probably the most important being the wide-spread conviction that child-bearing is physiological, and that it is dominated by the mysterious and supernatural. Also of far-reaching influence was our prodigality of human life in the pioneer days; large families were the rule and if one or several infants failed to survive, one never thought to burden his physician with such a problem, especially when a bounteous nature would most certainly correct the error all too soon.

Also contributing to the delay in the development of obstetrics is the essentially disagreeable nature of the work. The long hours, disturbed sleep, and complete disruption of one's social

(Please turn to page 11)

Michael! Where Is Your Dime?

BY MARY A. BURCHARDI, R.N.
Supervisor and Instructor in Pediatrics

MICHAEL! Where is your dime? . . ." Mrs. Foster's hand, half raised to lift the telephone receiver sank back. It would be a long time before the simple action of answering the telephone, or even the sight of it, would cease to release the flood of memories carrying her back through the last two weeks to the day of Michael's third birthday.

Michael, three years old, blue-eyed, blonde and sturdy-looking in his new sailor suit . . . Michael, still a bit breathless from blowing with all his might at the flickering candles of his birthday cake . . . Michael, no longer a baby to be fussed over, to be carried about as a sweet-smelling bundle so entirely dependent upon his mother.

On his third birthday even Michael seemed to sense that an entirely different value had been stamped upon him. Proudly he stood, sturdy little legs planted apart as in his first toddling days, and his shining eyes staring with awe at the small coin that Daddy had planted in his pinkly-scrubbed palm.

"For keeps," Daddy had said. That meant all his own . . . not to be fed into the ever-hungry tummy of his glass piggy bank. And Michael knew the value of this shining thing. Didn't he go to Nursery School? Five pennies saved meant a nickel from his daddy to buy a new box of crayons or to be fed to Piggy. Two nickels would get a dime but never before had he achieved this wealth. Today, on his birthday, he had suddenly become a big boy and big boys could be trusted with a dime!

Mrs. Foster had hurried back from answering the ring of the telephone.

"Michael, where is your dime!" The minute she re-entered the room she sensed that something had changed. Still clutching his beloved elephant, his face was turned towards her with a look of utter astonishment mingled with fear and even pride.

Even before he spoke, Mrs. Foster knew the answer. Her Michael, her big boy of three years—was still a baby after all, a baby whose most precious belongings would wander naturally into his little mouth. Once more the urgent question: "Michael, where is your dime?"

"It went right down into my tummy, Mommy!"

Mrs. Foster could not remember how she ever reached the Children's Floor of St. Luke's Hospital. Sometime in between she remembered sweeping up the bewildered Michael who now howled lustily, not because of pain but because she would not let him take his "Jumbo" along. Somehow she must have called her husband and there must have been the long ride through quiet suburban streets and unbelievably crowded city traffic, till the car at last reached the hospital.

Michael had been a St. Luke's baby and Mrs. Foster knew that behind the quiet questioning and seemingly unhurried attitude of doctors and nurses lay a watchfulness which would jump into efficient action when the time was ready.

Fears entered her heart every time she looked at Michael. He had begun to make friends with one of the nurses who, understanding that Michael's sobs were not raised in fright or pain, had pro-

ST. LUKE'S NEWS

duced what surely must be "Jumbo's" twin brother.

No, Michael did not look ill. How hard it was to tell about the daily schedule of a small boy when soon perhaps there might be no necessity for such a schedule. Yet, there was comfort in talking to this friendly girl about the innumerable routine tasks which made up Michael's daily life.

The wanderings of the small silver coin in Michael's tummy seemed less disastrous—even a bit funny. It was comforting to hear that he was always under the watchful guidance of his doctor. There would be little danger in Michael's daily life here. A strange bed, of course, but just as safe as his own at home. New toys, yes, but so many to choose from that he would never miss those left at home. As soon as he was able to get up the spacious playroom would become his romping ground. The room would look different from that at Nursery School but all the work and play things he loved would be there.

In the meantime, while skillful hands explored his tummy to stop the dime's voyage, friendly nurses would watch him every hour of the day and night. While his energetic little body might fret a bit in the confining bed, there would be an experienced kindergarten teacher to help him over the long hours. There would be nursery-rhyme singing with the nurses during bath hour. There might even be a visit from "Peter, the Wolf" who would talk to him out of a big black box.

Possibly it was harder for Daddy and Mommy to leave Michael than for him to see them go. He looked so fresh and clean in his striped pajamas. With a sigh Mrs. Foster had to acknowledge that even the pajamas didn't look like "hospital" and Michael enjoyed choosing the color of them himself.

But where was the silver dime? If

only those skilled hands would be able to extract it!

With a start Mrs. Foster lifted her head from her chair. The sharp jangling of the phone brought her back to reality. As she lifted the receiver she heard her husband's voice.

"Yes, Tom, he's sleeping. He ate every bit of his supper and when I tucked him in he begged me to show him his 'tummy dime' once more."

She had forgotten, for a moment, that Michael was back as rosy and happy and energetic as ever a boy of three could be. All this afternoon he had been cuddling close to "Jumbo" telling him about his "Jumbo brother" at the hospital. When she brought him his orange juice he had looked up and said: "This is nourishment, Mommy," and "Why don't you and Daddy wear those funny nightgowns you put on when you came to see me in the hospital?"

Yes, Michael was home and there—on the mantle set into a narrow frame—was Michael's "tummy dime."

HAVING FUN IN THE PLAYROOM



St. Luke's News

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MRS. JOHN W. GARY, *President Woman's Board*
DR. SELIM W. MCARTHUR, *President Medical staff*

Vol. 2 NOVEMBER, 1941 No. 10

THE GIFT LIVES ON

One of the many interesting things the visitor to St. Luke's sees on his tour through the hospital is the numerous memorial plaques on walls and doors honoring the many friends who have made St. Luke's Hospital possible.

We are proud of our benefactors—just as those who have given so generously must be glad for the opportunity St. Luke's offers to render a great service to the community and thousands of individuals, rich and poor alike, who come here each year to regain their health.

Gifts to such a non-profit institution as St. Luke's are forever alive in the service they render to others.

Not a day passes but some person receives the benefit of the John Jay Borland Fellowship Fund for medical research; the Goodman gift which maintains private and semi-private accommodations at a minimum cost to patients; or the many services made possible through the scores of contributions from the Schweppe family.

All gifts, however small or large, play a part in the service St. Luke's

renders. We mention these things to remind our patients and visitors, that they too, can make such services possible, and to renew our appreciation to the donors for their far-sighted generosity.

THE SCHWEPPE MEMORIAL

All friends of St. Luke's will wholeheartedly approve of Dr. McArthur's suggestion, made in the last issue of The News that the proposed new Nurses' Home, when completed, be named as a memorial to Charles H. Schweppe. A formal resolution to this effect has already been framed for consideration by the Trustees, and, of course, there is no doubt that it will be carried by a unanimous vote.

However, before the actual construction begins all the money for the Home must be raised. Yet it is important that we begin construction as soon as possible. The proposed new residence will not only provide an adequate home and additional educational facilities for our nurses, but at the same time it will release three floors, now housing new students, for hospital care for additional sick and needy patients and free work.

As we go to press, \$468,554 of the \$650,000 needed has been raised. Contributions are coming in every day and there is every indication that we shall reach our goal. We know of many who plan to contribute but as yet have not sent in their pledge cards. We know there are other public-spirited citizens who, as they become acquainted with the splendid work of St. Luke's nurses in defense, in industry and here in our own hospital and community, will make a contribution.

All contributions, however small, are welcome. Won't you send in your pledge card today?

An Unsentimental Photographer Looks at Babies

ONE unsentimental photographer of children is Torkel Korling whose pictures appear on the following two pages and on page 13.

Korling is a genial six-foot-two Swede with an unassailable calm. Perhaps it's because he has three children of his own that he sees and photographs children in a realistic light. "Children should be photographed," he says, "as if they had blood in their veins—not sugar water."

After a father has changed diapers, wiped noses, and quelled temper storms for six years he knows that cuteness is but one of the facets of a child—and a fleeting one at that. Korling is also a mechanical genius, and it may be that his practical point of view keeps his pictures down-to-earth, which is where they belong.

This is only one of the many reasons why Korling has been called the outstanding photographer of children in the country.

Korling follows children through their daily lives, and catches all the great and small events which call forth the whole emotional scale. He knows that if he can catch a young child walking without help he has a good chance of catching a fine expression of pride. He likewise knows that at the bedtime hour there is a good possibility that he can catch fury, frustration, or just plain defeat.

Three things give Korling's pictures their special interest, over and above their realism: (1) the excellent photographic technique he achieves in spite of the extreme moveability of his subjects, (2) his love of children, (3) his ability to say so many varied things about them.

A few of Korling's suggested "don'ts" for amateur photographers are:

Don't form ideas of how to photograph a child in advance—see him in his own home. Plan your strategy accordingly.

Don't try to dramatize the tiny face of a child with spot-light effects. The appeal is simplicity.

Don't give children toys to play with unless you have a lot of time to spare. And remember if you try to take away the toy from the child, you find yourself a blackguard with a howling accuser on your hands.

Don't forget to introduce contrast in subject matter in your shots. The tiny child clambering on the chair designed for grown-ups is much more helpless-looking and emotion-stirring than the baby sitting on a toy chair.





"He is so little to be so large!
Why, a train of cars, or a whale-back barge
Couldn't carry the freight of the monstrous weight
Of all his qualities, good and great."

WHO SAID IT'S



"God one morning, glad of heaven,
Laughed—and that was you!"



"What is the little one thinking about?
Very wonderful things, no doubt! . . ."



"She who, wise as she was fair,
For subtle doubts had simple clues."



"When chi
They have

"But bless you, he's my brother,
For he's just like me inside."



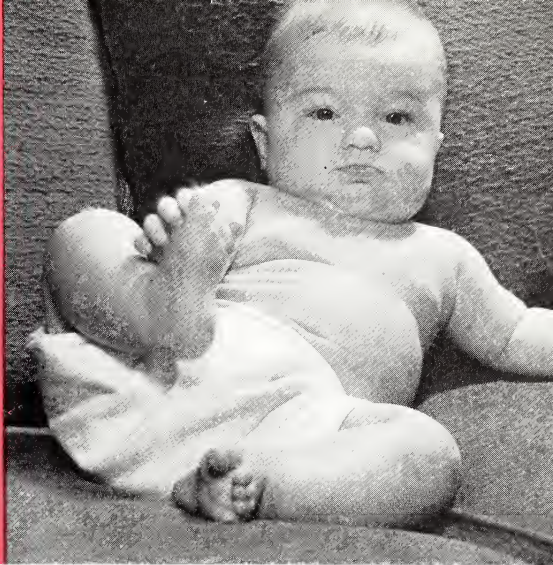
SORRY WORLD!

bies

by
Torkel Korling



"Who can foretell for what high cause
This darling of the gods was born?"



"In silence I must take my seat, . . .
I must not speak a useless word,
For children must be seen, not heard."



stand still,
some ill!"



"I'd rather laugh, a bright-haired boy
Than reign, a gray-beard king."



"Loveliness beyond completeness,
Sweetness distancing all sweetness,
Beauty all that beauty may be—
That's May Bennett, that's my baby."



"The way to a man's heart
is through his stomach."

Torkel Korling will answer readers' questions on photography in the next issue of The News. Send your queries to The News, Public Relations⁸⁸ Department, St. Luke's Hospital.

Around the Hospital

Don't say I told you, but fact is that we're losing Dr. George Trimble very shortly. Rumor has it that the doctor is forsaking the Emergency Room for more thrilling tasks in the Medical Corps of the Royal Canadian



Air Force. He studied aviation while in medical school with a view to becoming a flight surgeon or something equally exciting and has had his pilot's license for the past year and a half. We're sorry to see you go, Doctor. Many, many, happy landings!



You can address Florence McBeth, formerly of our Nursing Staff, in care of American Airlines. She left the hospital on September 29th to become a stewardess.



You have a friend in the hospital or perhaps a relative? And you just can't get down to see them? That's too bad, of course, but don't worry. Just call Mrs. Snapp in 'The Shop at St. Luke's and say: "I want a toy sent to a little boy six years old."—or "Send a good book up to my uncle who's sixty." They'll wrap it prettily, enclose a card and your good deed is done for the day.



Right now we find our "hello girls" very much excited and well they should be because their department is going to have new quarters on Main 10.

Miss Maud Gooch who has just rounded out twenty-five years of service at St. Luke's has been designated as the person responsible for the conduct of the hospital during the night. This is in addition to her duties as Assistant Director in charge of Night Nursing Service.



And this is good news! Virginia La Flamboy who has just returned from a vacation in Bermuda is writing a story about her travels and conditions down there for a future issue of *The News*—and it's going to be good. Watch for it!



Lucille Eschenbach of our Nursing Staff has taken leave of St. Luke's to become head of the nursing department in the Kingsbury Ordnance Plant at La-Porte, Indiana.



The accompanying picture shows Sylvia Horvath, one of St. Luke's student nurses, in the regal gown she wore when she won the title "Miss Hungary" again this year. She has held the title given by the Pro-Hungary League continuously since 1939. Her costume is the traditional court dress of the Hungarian royal princess. We bow to you, Sylvia!



Stork's-Eye View

(Continued from page 3)

existence cannot fail to repel many young men, especially when better remuneration can be obtained fitting spectacles during banker's hours. Confinements conducted at home with little or no assistance offer very little attraction to young men who can readily specialize in other, more attractive, fields.

The modern hospital has done much to alleviate many of the unpleasant features of earlier obstetrics. Close co-operation between administration and staff results in an ideal physical set-up. The Obstetrical Department is an isolated unit in St. Luke's and yet specialists in all other fields of medicine are immediately available should complications arise; also at hand are the laboratories, the special operating rooms and the unlimited equipment these may offer when needed. Rules and regulations set up by local and national health groups have gone far to eliminate irregular and often detrimental procedures in vogue years ago.

The close supervision of a group of specialists in obstetrics, teaching by word and precept the younger staff, the residents, internes and nurses is the guiding hand, unseen to the patient, but shielding her and her infant with a zone of safety.

BEG YOUR PARDON

Dr. Andrew McNally is *Associate* attending urologist and not assistant as incorrectly listed in the Annual Report Issue of the News.

Moving?

Be sure to keep the Public Relations Department advised of your changes in address.

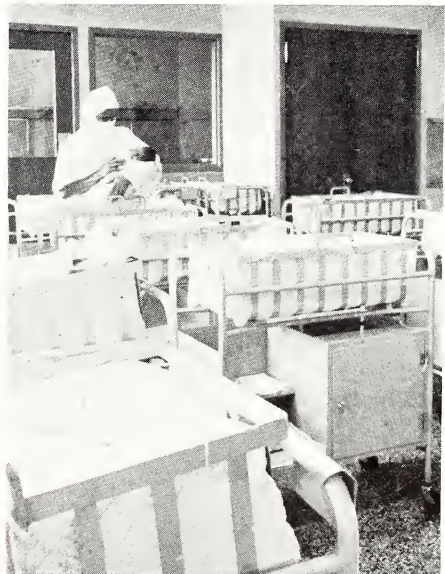
WHO'S WHO: III

TIS said the communications system is the "pulse" of a hospital. Eleanor Stake, as Chief Telephone Operator, has been keeping her finger on it since 1927 when she first joined the St. Luke's family. She and her crew of nine girls handle approximately 6,000 outgoing, incoming and inter-hospital calls in nine hours each day. And that, she says, takes a lot of skill as well as an unassailable disposition.



In addition to her work at the hospital, Mrs. Stake has found time to rear five children (her oldest son is in the Army), ranging in age from 23 to 3, and still maintains her 136 bowling average.

LOOKING INTO ST. LUKE'S NURSERY



Dr. Carl A. Johnson

Holding a Baby

BY HEYWOOD BROWN

MEN profess lack of ability to wash baby's face simply because they believe there's no great fun in the business, at either end of the sponge. Man even pretends that he doesn't know how to hold the baby. From this has grown the shockingly transparent fallacy that holding a baby correctly is one of the fine arts; or, perhaps, a wonderful intuition which has come down after centuries of effort to women only.

"The thing that surprised Richard most," says a woman novelist, "was the efficiency with which Eleanor handled Annabel. Her fingers seemed, of themselves, to curve into the places where they would fit the spineless bundle and give it support." Places indeed! Except that right side up is best, there is not much to learn about holding a baby. There are 152 distinctly different ways—and all are right! At least all will do. A baby is so soft that anybody with a firm grip can make places for an effective hold wherever he chooses.

I believe in a rough equality of parenthood. In shirking all the business of caring for children we men have escaped much hard labor. But we have also missed much fun of a very special kind. Children mean nothing at long range. For our own sake we ought to throw off the pretense of incapacity and ask that we be given a half share in them. I hope that this can be done without sharing the dishes, also. I don't think there are any concealed joys in washing dishes. Washing children is quite different. A dish is an unresponsive thing. It gives back nothing. After you have washed somebody else's face you feel that you

know him better. A child's face offers competitive possibilities. It is interesting to see just how high a polish can be achieved without making it cry.

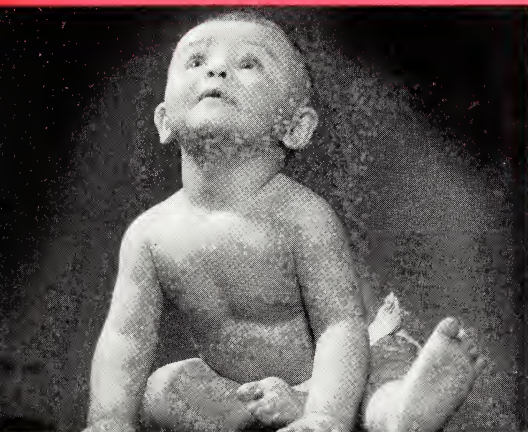
There is also a distinct sense of elation in doing trifling practical things for children. When you have completed the rather difficult task of preparing a child for bed and actually getting him there, you have a sense of importance almost divine in its extent.

There is less to be said for dressing a child, from the point of view of recreation. This seems to us laborious and rather tiresome, both for father and child. Still, I know one man who managed to make an adventure of it. He was a skilled automobile mechanic, much in demand at races where tires are whisked on and off. He brought his technique into the home, and boasted that he had broken all world records for changing all or any part of a child's clothing. He was a silent man who habitually carried a mouthful of safety pins. He wasted no time in preliminary wheedlings but tossed the youngster on the floor and even before her head had bumped he would be hard at work. He endeavored always to have his task completed before the child could begin to cry. He never lost.

There is nothing dull in feeding a child. I doubt whether the world holds for anyone more soul-stirring surprise than the first adventure with ice cream. There is the immediate frightened rebellion against the coldness of it, and then the amazing sensation as the strange substance melts into magic of pleasant sweetness. Even golf is a

(Please turn to page 14)

THINGS ARE LOOKING UP



"He gave to man an uplifted face,
And bade him contemplate the heavens."



"Sweet babe, in thy face
Soft desires I can trace,
Secret joys and secret smiles,
Little pretty infant wiles."

"Today, whatever may annoy
The word for me is Joy, just simple Joy."



"A child should always say what's true
And speak when he is spoken to,
And behave mannerly at table;
At least as far as he is able."



"Nothing in the affairs of men is worthy of great
anxiety."



New Citizens



Look what September brought — thirty-seven boys and forty-six girls (but no twins this time!)—yet one of the handsomest crops of the year! The proud and beaming parents are:

Boys to Mr. and Mrs.:

W. McNeil Kennedy
Arthur Jens
Thomas Powell
Joseph Scott
Carter Strand
John Krietenstein
Joseph McGee
Ross Aldrich
James Daniels
Thomas Raimbault
William McKinney
Theodore Chapman
Harry Blandford
Ralph Bradley
Redford Sargent
Edward Brugger
Don L. Davis
Dr. J. R. Norcross

Stanley Loader

Louis Richardson
Arthur Vellenga
Robert Walker
Joseph Kohler
Carlo Aiello
William Fergus
Ira W. Jones
Paul Bell
Luther Kleidon
Robert Ritchie
Welbert Razen
Nick DeFronzo
Neton Wasson
Walter Piskowsky
Harry Ohlinger
Robert Schwarz
Frederick Bergmann
John Wilson

Girls to Mr. and Mrs.:

Donaldson Butler
John Doherty
Francis Biron
Franklin Strubbe
Cleveland Bishop
Philip Nagler
James Brewer
James Solomon
Aaron Levy
Alfred Jackson
P. C. Harrington
George Stevens
Frank Gallagher
Fred Phelps
Haldane Burns
Edward Hull
John Murray
Thomas Donovan
David Rivera
Millard Briggs
Charles Fisher
David Sutton
Toivo J. Mackey

Joseph Castello
Stark Humphreys
John Griffin
John Newdorp
Carson Mathews
Thomas Jordan
Kenneth Coughenour
Stanley Kezon
Robert McHale
John Howell
Lance Smith
Joseph Smietanka
Alvin Long
Otto Schulz
George Bakeman
Robert Wright
John Thomson
Frank Lisak
Theodore Konieczka
Harold Duke
Woodrow Kibby
George Dawson
Wallace Sydanmaa

Holding a Baby

(Cont'd from page 12)

trifling thing beside the privilege of taking a small son to the zoo and letting him see his first lion, his first tiger and, best of all, his first elephant. Probably he will think they are part of your own handiwork turned out for his pleasure.

To a child even the meaneast of us may seem glamorous with magic and wisdom. It seems a pity not to take advantage of this chance before the opportunity is lost. There must come a day when the most nimble-witted father has to reply, "I don't know." On that day the child comes out of Eden and you are only a man again.

(Excerpt from the essay in the collected works of Heywood Brown—one of America's best-loved journalists and columnist of the N. Y. World Telegram prior to his death in 1939. Printed with the kind permission of Harcourt, Brace & Co.)

Books Are Welcome

Significant in these critical times is the 1941 Book Week slogan: "Forward with Books." From November 2nd to 8th, it will promote good reading for children.

The Children's Library at St. Luke's Hospital is appreciative of the many fine books that have been contributed during the past year. Now there is an urgent need for children's magazines: BOY'S LIFE, CHILD LIFE, CHILDREN'S PLAYMATE, JACK AND JILL, PARENTS, and STORY PARADE.

Subscriptions to these magazines will be gratefully received or, if you have any 1941 issues which you would like to give, please send them to: Mrs. Andrew McNally, Chairman, Children's Library Committee, Woman's Auxiliary.

—E. E. McN.

Well, here's luck to you—and to all the young champions!



"When I am grown to man's estate
I shall be very proud and great,
And tell the other girls and boys
Not to meddle with my toys."



"The hair she means to have is gold,
Her eyes are blue, she's twelve weeks old."



"The man who always likes to hear his own
voice in the bathroom."



"Lips, however rosy, must be fed."



"He smiles and clasps his tiny hand,
With sunbeams o'er him gleaming,—
A world of baby fairyland
He visits while he's dreaming."

"The world has no such flower in any land,
And no such pearl in any gulf the sea,
As any babe on any mother's knee."

Newest Admissions for School of Nursing

1st row—Marilyn M. Thompson, Lillian A. Drost, Rhodora Jane Jones, Marilyn J. Newman, Jean Armstrong, Shirley Jean Nelson, Marian Virginia Fender, Faith Hartley, Dorothy Peggy Warren.
2nd row—Irene R. Ernst, Marian Ione Kircher, Beverly Allyn Parsons, Frances E. Cruse, Rosemary Petersen, Elouise J. Reiman, Janice M. Seiver, Margaret C. Oates, June L. Larson, Jean E. Yeakey.
3rd row—Rena B. Hopkins, Mary Alice Fleckenstein, Betty Nan Getschow, Margaret Abbott, Betty June Provancha, Audrey R. Kuhn, Nadine Collingwood, Ruth E. Phillips, Roberta R. Sanders, Marie J. Chase.



Joan McArthur White

1st row—Margaret I. Moody, Doris M. Fiedler, Marie M. Hubbard, Abby M. Sutherland, Alice A. Kelly, Ruth Fratcher Boswell, Wilma M. Campbell, Lois Lockwood, Verle B. Shurtleff. *2nd row*—Marilynn Sherman, Ruth A. McCrimmon, Louise Larwill, Gladys M. Tiegs, Helen E. Munson, Mary Suzanne Essington, Mary G. Castle, Peggy M. Cavanagh, Betty M. Borchardt. *3rd row*—Lucille E. Schultz, Lenora Fisher, Gladys Maxine Faulkner, Lois Lorraine Hutchinson, Ruth M. Wark, Emma B. Pierce, Melva M. Wilson, Alice J. Freiburger, Dorothy L. Brown, Harriett Louise Cox, Angela J. Del Vecchio.

GIVE FOR THE NURSES' HOME — NOW

St. Luke's NEWS

The New Nurses' Home Campaign

by
A. Watson Armour

Letter from London

by
Catherine Golden, R.N.

George W. Hall Memorial

December 1941



NURSES' CLASS

Make Your Gift Now

FOR THE NEW NURSES' HOME

DURING the next few weeks hundreds of friends of St. Luke's will be campaigning to raise the remaining amount needed for building the new Nurses' Home.

We are now already well within sight of our new \$775,000 goal and I should like to urge all of you to be represented in this great work. For the erection of the new Nurses' Home will fill a real need in our city.

Construction costs have gone up and it has been necessary to increase the amount we must raise. Costs may go even higher and it is, therefore, important to complete the campaign and begin building as soon as possible.

The new Nurses' Home will provide living accommodations and permanent educational facilities for the young women who are preparing themselves for service to the public in civilian and defense needs.

The new Home will restore for much needed patient use the twelfth floor of Main Building now used for instructional purposes—(40 additional ward beds or 28 semi-private accommodations will thus give increased capacity to the hospital).

It will enlarge the school so that more nurses can be trained to meet the growing emergency. Many St. Luke's students are already being trained for participation in Public and National Service.

Finally, the new Home will enable the school to maintain its excellent standing and continue to obtain the highest type of students.

On behalf of the Hospital I express our great appreciation to the members of the Woman's Board, the Medical Staff, Womens' Auxiliary, Nurses, Internes, Hospital Staff and other groups and friends of the Hospital who are now participating in the campaign. With the continued cooperation of everybody concerned, there is every indication that we can attain our goal.

If you haven't already made a contribution won't you please send it in before the fifteenth of December? Any amount will help.

A. Walter Ammer

*First Vice-President,
St. Luke's Hospital*

*From a St. Luke's nurse who is now serving with
the Harvard Unit of the Red Cross in England.*

London Letter

BY CATHERINE GOLDEN, R.N.



SO BE IT! Here I am—scrubbing, cleaning and disinfecting! We are working in an isolation hospital in *Pill* near Bristol, during an epidemic of paratyphoid. We work hard, but it is interesting and, of course, wonderful experience. There seems to be a little confusion about who is a nurse and who is a sister. The standards here are quite a little different, but we shall soon have them straightened out—I hope.

The crossing was disgustingly uneventful. We were most comfortable—on a regular luxury liner. We came in heavy convoy with troop ships from Canada. It took only seven days and except for a very definite feeling of tension, it might have been a pleasure voyage.

We came in at Grenosh, Scotland, and from there to Glasgow. Our trip was very hurried and, of course, quite secret. We were only in Scotland a few hours and that at night so we didn't see much.

MEETS QUEEN MARY

One of my most thrilling experiences was my presentation to Queen Mary. She was most interested in the Unit and talked to each of us individually.

The morale of the English people is amazing, and the beauty of the countryside is beyond description. Everything is much greener, the flowers are twice as big and bright and it seems every patch of land is cultivated.

We spent a day and a half in London registered with the police, etc. Lon-

don looks quite bad but they have cleaned it up and rebuilt a lot because there have been no blitzes in a couple of months. We saw Westminster Abbey, Big Ben, Piccadilly Circus, Scotland Yard, the Thames and also St. Thomas' which really is badly hit. They didn't let it interfere with the work, however; they just moved the hospital, or a small part of it, to the basement.

NIGHT AIR RAIDS


We have had a little action the last few nights. It begins shortly after dark. Our buildings are in complete blackout. The raid is heralded by a very loud and eerie siren. The searchlights and moonlight make the night seem like a fairyland. The gunfire is very bright and the whole thing is exciting for us, but it is horrible for those who were here last winter and realize the terror of these blitzes.

My attitude has certainly changed—this is not just an adventure. It is, I am sure, the most worth-while thing I will ever be able to do. Everyone seems to have courage, even the children. They do need, though, the good old American drive. Perhaps there is a method in their waiting; I surely hope someone finds a solution soon—it is a grim business.

We have been to Bristol a couple of times. It seems to be worse than London. Destruction on almost every street but the people are ignoring it very gracefully.

(Please turn to page 12)

Does a Hospital Have a Heart?

 MOST PEOPLE would think the modern metropolitan hospital a much too efficient, practical, and large an institution to have heart felt concern for the many unfortunates it serves. But some people know stories—stories very much like this one:

Several years ago a ten-year-old boy was brought to St. Luke's Clinic with a shriveled, bone-thin left leg. Infantile paralysis. His young back was bent from holding the weak leg stiff so that he could walk. Doctors prescribed a knee operation.

The parents of the boy were worried. The father was a laundry driver. Operations were beyond his budget, but he could pay some of the expense. His son needed the operation so the hospital paid the rest.

The operation was performed. The boy returned home and in three months his knee was strong enough to walk on, but the doctors were thinking about his dragging ankle. They decided another operation would help.

The father was concerned. Times were hard. He could get some money. The hospital would pay the rest.

The ankle was operated upon. The boy returned home, but home was different now. The father was unemployed, the family moved to a poorer neighborhood, they went on relief. But the hospital watched over the boy as his leg grew stronger: clothes, shoes, braces, crutches, and treatments that his parents could not afford.

And, suddenly, the terrible year was over. Life was not too good, but then it was not as barren as it had been

either. There was work and the family could manage now. The boy was graduated from grammar school.

During the summer he was sent to Wisconsin to the Crippled Children's Camp at Brown's Lake. He grew brown and proud for he was going to enter high school in the fall.

But the doctors decided that the knee was not as good as it could be. Another operation was needed and the hospital made it possible. Six months later the boy entered high school.

The family had good times and bad for four years, but mostly good. For the boy was healthy and resourceful. He made up the half-year of school he had missed. He became editor of his school paper, valedictorian of his graduating class, and he won a scholarship to a great university.

It is a struggle to go through college on a scholarship, but the family was the kind that could face the worst and hope and sacrifice to help their son.

And then, too, they discovered that there are other institutions like the hospital, ready to lend a helping hand.

This year the boy was twenty-one and no longer a boy. Next June he will be graduated from his university. The hospital still sees him and frequently helps him.

But soon it will cease to help him, not that it is unwilling, but because now he can take care of himself.


Does a hospital have a heart?

Well, most people would not know and others would laugh if they were asked. But some people know stories—stories like this.

Charles A. Dana's famous editorial in the New York Sun replying to a letter from eight-year-old Virginia O. Hanlon, whose friends told her there was no Santa Claus. . . .



YES — THERE IS A SANTA CLAUS!

 Virginia, your little friends are wrong. They have been affected by the skepticism of a skeptical age. They think that nothing can be which is not comprehensible by their little minds. They do not believe except they see. All minds, Virginia, whether they be men's or children's, are little. In this great universe of ours, man is a mere insect, an ant, in his intellect, compared with the boundless worlds about him, as measured by the intelligence capable of grasping the whole truth and knowledge.

Yes, Virginia, there is a Santa Claus. He exists as certainly as love and generosity and devotion exist, and you know that they abound and give to your life its highest beauty and joy. Alas, how dreary the world would be if there were no Santa Claus! It would be as dreary as if there were no Virginias! There would be no childlike faith, then, no poetry, no romance, to make tolerable this existence. We should have no enjoyment except in sense and sight. The eternal light with which childhood fills the world would then be extinguished.

Not to believe in Santa Claus? You might as well not believe in fairies! You might get your papa to hire men to watch all the chimneys on Christmas Eve to catch Santa Claus; but even if they did not see Santa Claus coming down, what would that prove? Not everybody sees Santa Claus. The most real things in the world are those that neither children nor men see. Did you ever see fairies dancing on the lawn? Of course not; but that's no proof that they were not there. No one can conceive or imagine all the things that are unseen or unseeable in the world.

You may tear apart a baby's rattle and see what makes the noise inside, but there is a veil covering the unseen world that not the strongest man, not even the united strength of all the strongest men that ever lived, could tear apart. Only faith, fancy, poetry, love, romance, can push aside that curtain and view and picture the supernal beauty and glory beyond. It is all real. Ah, Virginia, in all the world there is nothing else real and abiding.

No Santa Claus? Thank God, he lives, and he lives forever! A thousand years from now, Virginia, nay, ten thousand years from now, he will continue to make glad the hearts of children.



St. Luke's News

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cal staff*

Vol. 2 DECEMBER, 1941 No. 11

GEORGE WASHINGTON HALL MEMORIAL

Further evidence of the great esteem members of St. Luke's Medical Staff held for Dr. George W. Hall is the move already well underway to establish a memorial in his name.

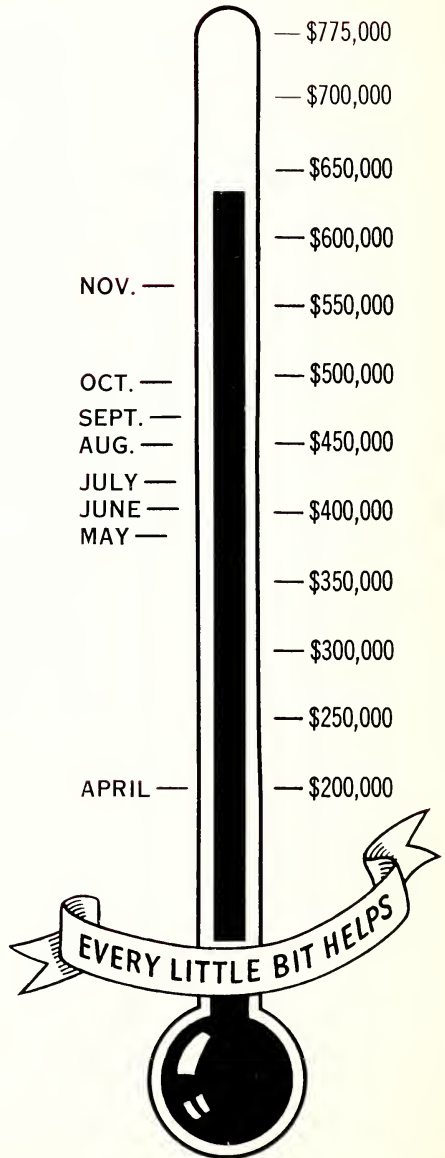
Many members of the Medical Staff and other friends of Dr. Hall have already sent in their contributions.

The form of the memorial has not as yet been definitely decided but a suggestion has been made that the money raised be used to name the Science Laboratory or some other part of the New Nurses' Home.

Medical Staff members and other friends of Dr. Hall can make their contributions directly to the Hall Memorial Committee composed of Dr. Richard Capps, Dr. Selim W. McArthur and Dr. Eugene Edwards, or send them to the Public Relations Department.

Checks should be made payable to St. Luke's Hospital indicating that they are for the Hall Memorial Fund.

New Nurses Home FUND



Let's Go Over the Top

SEND IN YOUR CONTRIBUTION NOW

A St. Luke's Nurse writes of her experiences in war-stirred Bermuda.

Nurse in Bermuda

BY VIRGINIA LA FLAMBOY, R. N.

ALL Bermuda mail, both incoming and outgoing, is censored. Everyone on the islands feels that it is an imposition on the censors to write unnecessary letters—that is the reason I waited until I was home to tell you what Bermuda is like at present.

Right now it is probably one of the most fascinating places in the Western Hemisphere. It is a beehive of activity as if they were trying to catch up on the last hundred years—like Rip Van Winkle.

When I stepped ashore at Hamilton, it was like going into another world. The brilliant sunshine on glaring white coral streets and colored stucco buildings made it seem almost fairylike.

Queen Street and Front Street were bustling with bicycles, carriages and U.S. Navy and Army station wagons. Army and Navy officers walked briskly along with briefcases under their arms, while the natives strolled languidly.

The American bases that are being built at an incredibly high degree of speed and efficiency amaze and at the same time appear to antagonize the Bermudians. In the subtropical climate it seems impossible that anyone would hustle or expect them to hurry. Having managed to get along all their lives with bicycles, horses and carriages, those people resent seeing the American officials racing about—at the rate of twelve m.p.h. in their station wagons and workers being transported in trucks. It certainly does stir up the coral dust, however, a few bombs might do that too.

On a quick tour of the island, our driver showed us a large hill, which is

also a bombproof shelter. In case of war and “bombs” just picture the populace cycling to St. Georges to take refuge in these caves? He also showed us an English camp for German prisoners of war (they have quite a few interned there) also some French prisoners.

Food is a major problem in Bermuda, as it always is to insular people. However, due to the influx of Americans with families the situation is sometimes acute. It is estimated that there are over 30,000 Americans.

Even bread and potatoes, the old standbys, can't be purchased. Fresh fruit and vegetables are things heard of but rarely seen. Occasionally one can buy fresh peaches, wizened up little things at sixpence or 10c to us. Eggs are 90c a dozen—bacon 80c.

The American families could trade at the Marine Commissary at Castle Harbor—if one could get there, however, ten miles on a bicycle is a long way to go and the baskets on the bicycles aren't big enough to carry supplies. The commissary carried staples in large sizes, so it was not particularly satisfactory for the average family.

I'll be back next month to tell you about nursing activities in Bermuda.

A MAIN STREET IN BERMUDA





Duty on the Obstetrical Floor



Time Out for Tea



Training

St. Luke

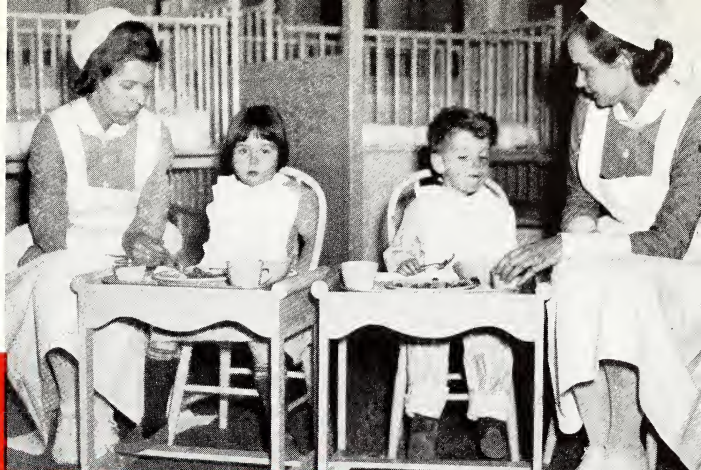


Assisting in an Emergency

Service in the Ward



Defense



Lunchtime in the Pediatric Department

s Nurses



Receiving Orders for the Day



In the Chapel



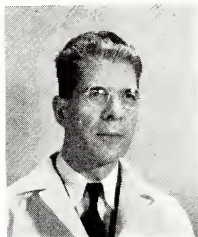
Preparing Trays for Patients

Around the Hospital

Virgil Cooper, night desk clerk, was married on November 1st to Miss Karla Schierhorn at St. Bernadine's Church in Forest Park. Johnny McSweeney, Chief Clerk, was best man. Our best wishes to the newly-weds and a word of warning to McSweeney—it's contagious!



Dr. W. F. Lyon of our Staff has been appointed Medical Director of International Harvester Company following the retirement of Dr. Britton. Dr. Burton C. Kilbourne, a member of St. Luke's Internes Alumni, becomes Dr. Lyon's assistant.



Liberty Moore, one of our "hello" girls, just purchased a \$50 gun and intends to do some duck hunting in the near future. If her aim with a gun is as good as it is with the plugs on the board, Heaven help the poor ducks!



Dr. F. E. Sarver of the Interne Staff was married on November 8th to Verona Larson, former student nurse. (We find out everything, doctor.)



Drs. R. C. Lawson and M. M. Thompson have returned rather reluctantly to their duties after their respective vacations.

Drs. Paul Sheridan and Thomas Hobbs of the Resident Staff attended the annual Fortnightly Meeting of the New York Academy of Medicine in New York recently. Dr. N. Clark Gilbert of our Staff joined group there later as guest speaker.



Dr. Sidney Weinhouse, Fellow in Pathology, was injured in a chemical explosion at the University of Chicago on October 27th. His many friends can reach him at Billings Memorial Hospital.



Eighty would-be internes took an examination for admittance to St. Luke's on November 1st. Of this number, thirty-two will be chosen.



Mr. and Mrs. Raymond H. Gifford have announced the engagement of their daughter, Mary, a St. Luke's student nurse, to Dr. Frank W. Jones, our resident physician in pathology.



The Oxygen Therapy Department announces cash prizes will be given to three student nurses who submit the best design for a fire prevention poster. Get in touch with Miss Frost for further information.



We're all sorry to hear that Mr. B. I. Budd was injured in an automobile accident on Thanksgiving Day. Here's wishing a speedy recovery.

Xmas Gifts at The Shop

St. Luke's Hospital Shop carries a large assortment of Christmas gifts for every member of the family. Prices range from 50c to \$5. So why not come out of the crowds down to the little shop warm in the Christmas spirit?

Some of the lovely and unusual gifts that took our eye are: The note paper which sells for only \$1.00—many sheets of paper decorated with holly, mistletoe, Santas and the like. You'll love it for invitations to your holiday gatherings and personalized greetings.

For Father you'll find: Bronze twin ash trays; handsome but inexpensive clocks; shaving lotions; or books.

Mother will like the Personalized Cologne with her initials on the bottle; a smart pocketbook with a billfold, change purse and license compartment; one of a large assortment of beautiful nightgowns; Lea-nore Creme Sachet; and from New York—suede covered Tang-tipped matches (slightly perfumed). Daughter will love these, too.

For the children we found Storybook dolls from California; Piggy banks "For Me When I Grow Up"; hand-woven baby blankets; and scores of games.

Realizing that patients want to do their Christmas shopping too, The Shop has adopted the slogan, "If you can't come to The Shop, The Shop will come to you." Just answer the questionnaire they will send you and they'll send a whole tray full of gifts from which you can choose just the one you want.

Your purchases in St. Luke's Shop will not only mean economy and comfort to you—it will mean care for some sick and needy person. For profits from The Shop are turned over by The Woman's Board for maintenance of the Social Service Department.

WHO'S WHO: IV

"Calling Dr. Kildare"—yes, sir, just as in the movies! For emergency's sake, Miss Anna Spence must know when each doctor enters the hospital, where he will be while in the hospital, where he is going when he leaves and a number of other details.



That's her job and that she does it well is evidenced by the fact that doctors, when calling her, do not ask for "Miss Spence"—they say "Information, please!"

Miss Spence has worked and lived at St. Luke's Hospital since 1925. For quick information about doctors just call her.



NURSES' HOME CAMPAIGN

As we go to press, the following friends of St. Luke's have accepted chairmanship posts in the Campaign for the new Nurses' Home.

Sterling Morton, General Campaign Chairman

Dr. E. L. Jenkinson, HOSPITAL STAFF	
Dr. G. K. Fenn, INTERNES	
Dr. Joseph A. Capps, MEDICAL STAFF	
Madeleine McConnell	} NURSES
May Collins	
Annie Lawrie	
Eve Morkill	
Maude Gooch	
L. L. McArthur, Jr.	} SCHWEPPE MEMORIAL COMMITTEE
Cyrus H. Adams	
Britton I. Budd	
Barrett Wendell	
Sterling Morton, TRUSTEES AND SPECIAL GIFTS	
Mrs. John W. Gary, WOMAN'S BOARD	
Mrs. M. G. Flannery,	} WOMEN'S AUXILIARY
Mrs. Harrold Bachmann	

New Citizens



Here are exactly 79 reasons why some people are probably going to have the Merriest Christmas of their lives this year—38 boys and 41 girls born to:

Boys to Mr. and Mrs.:

Raymond Ott
George Howser
Herman Van Mell
Thomas Shanahan
Oscar Marienthal
Edwin Perkins
William C. Beall
William Berry
Donald Pinney
Lucius Clay
Albert Gile
Earle Kuhnhofer
Edward Fraction
William J. Sennott
Gustavus Shallberg
Harry Graham
Carl Fricberg
Charles Baker

Gerald Cairns
Richard Hale
Edward Campbell
Robert Skinner
J. A. Wells
Gordon Smith
Earl Gooden
K. P. Morgan
Edward Rekau
Robert Cooke
Walter Slaughter
Bartlett Richards
Fred Bianchi
Robert Miller
Fidel Martinez
Robert Kelly
John Osborne
Francis Schoon

Girls to Mr. and Mrs.:

James Qualls
John Junkunc
John S. Townsend
Harry Roscoe
Allen North
Edward Dunn
T. L. Kelly
Dean F. Klarr
Russell Jones
Fritz Veit
Arnold Daum
Isaiah Thigpen
Robert J. Sugrue
Frank Anthony
Arthur Rattray
F. D. Bond
Dr. W. H. Highstone
Robert Hoffman
Carl Cotton
Dewey Ericsson

Edward Moran
Harold Zeringue
Richard Hensen
Fred Cramer
Walter Fillinsky
Oakley Clark
Grady Coleman
Louis Eazel
Joseph Staranowicz
Joseph Zieff
S. B. Hansen
John Reeser
James Turner
Merrill Ferree
Alvin Nehrenberg
Jesse Norman
John Siwinski
Charles Day
John Carr
Louis Giannetto

John Johnson

And one set of twins this month, boys, to Mr. and Mrs. James Lewis.

Here's a Very Merry Christmas to all of you new recruits. May your stockings be filled to overflowing with teething rings and rattles!

London Letter

(Continued from page 3)

I want to thank the hospital for my typhoid injections. Technique here is practically unheard of and if I miss getting it, my inoculations are certainly responsible.

Everyone here is, naturally, most appreciative. They have been very gracious and hospitable. I think we average about twelve cups of tea each day.

I wish I had a miniature electroshock machine in my knapsack. After trying to comprehend the use of English money, I find myself in pretty bad shape. I have given up and thrown myself completely at their mercy. I walk around with coins in my hand and ask them to help themselves. It will be a long walk back home for me.

It promises to be a grand year. Everyone in the group is full of vim and vigor and determined to make the best of every minute. I miss everyone so very much but I also am very grateful to be here and I hope I can contribute a little something where it is sorely needed. I am so anxious to hear all about everyone, a letter from home will be something closely resembling a fortune.

We have strict blackouts every night and so far I haven't braved one but life goes on just the same except that all living is done in the daytime.

ROOSEVELT FANS

Everyone here is a Roosevelt fan. Next to Churchill he is the most wonderful person alive. To be an American, at this time, is something pretty special.

I wish I had about 15 more St. Luke's nurses here—we could really do some business.

George Washington Hall

1869-1941



ST. LUKE'S has suffered a great loss in the death of Dr. George W. Hall. Everybody who knew him at St. Luke's loved and respected him. Though his work made many demands upon him, he never lost his sense of humor. Fellow Staff members will not soon forget the Friday morning meetings of the Clinic where he and Dr. Joseph Miller carried on a running argument about Dr. Hall's suggestion that all patients first be admitted to the Neurological Department for distribution!

He set a fine example for everyone in the hospital in the joy he found in living whether at work or play, also in his willingness to be of help regardless of how busy he happened to be. "Of course I'll see your patient" was the standard reply to his colleagues.

He suggested that St. Luke's Hospital establish a Neuro-Psychiatric and Neuro-Surgical Department. The administration followed his suggestion and St. Luke's was the first hospital in this section of the country to have such facilities available to the Staff and their patients.

Dr. Selim McArthur, Dr. Eugene Edwards, Dr. Joseph Capps and Dr. Richard Capps have just started a fund for a memorial to Dr. Hall by donating \$100 each to the Nurses' Home. Other friends of Dr. Hall who wish to give a contribution in his memory may do so by contacting members of the committee or the Public Relations Department.

George Washington Hall was born in Crawfordsville, Indiana on June 18th, 1869. He was graduated from Wabash College in 1890 and from Rush Medical College in 1893. He continued his studies in London, Berlin, Vienna and Munich. St. Luke's Hospital appointed him Senior Attending Neurologist in 1916 which position he held until his death in Detroit on October 25th, 1941. In addition to his work at St. Luke's, Dr. Hall was Clinical Professor of Neurology at the University of Chicago, member of the American Medical Association, Illinois State Medical Society, American Neurological Association, American College of Physicians, Neurological Society of Chicago. He was President of St. Luke's Medical Staff in 1932.

Contributors to the New Nurses' Home Fund*

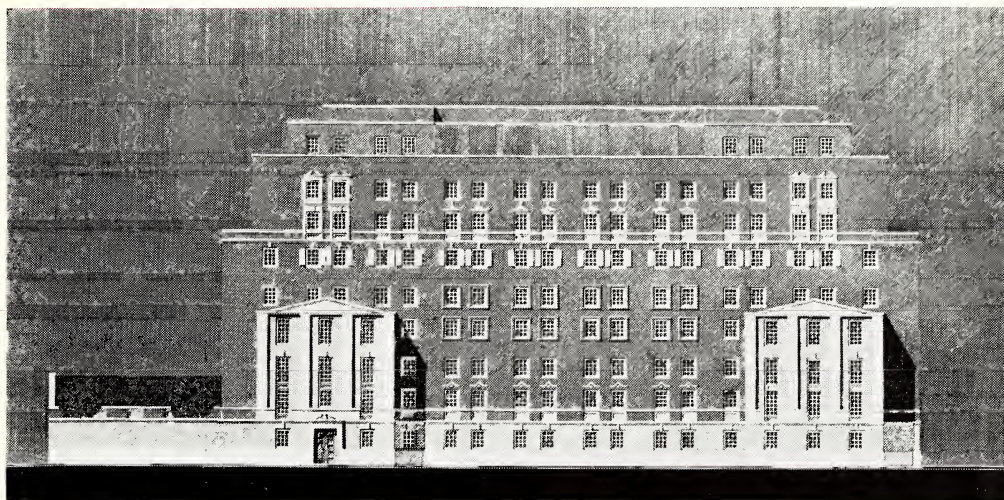
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 Miss Anne Ambridge
 Mrs. John D. Ames
 Mr. Arthur Andersen
 Arthur Andersen Co.
 Mrs. A. Watson
 Armour, III
 Miss LuLu B. Averill
 Mr. A. B. Bahcock
 Mrs. John H. Badger
 Miss F. A. Baldwin
 Mrs. Gordon C. Ball
 Miss Jane Barclay
 Miss Teresa Bartle
 Mrs. Fred H. Bateman
 Dr. and Mrs. C. E. Baume
 Mrs. Francis Beidler, II
 Miss Florence Beisel
 Miss Edith Bender
 Miss Anne M. Benson
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 Mrs. John Favill
 Miss Geneva Feamon
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 Miss Emily M. Fox
 Mrs. Lester E. Frankenthal
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 Miss Florence Koch
 Miss Gladys Kolb
 Miss Adeline Kronke
 Mr. R. G. Krueger
 Mrs. V. Lamb
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 Miss Jessie Lawrie
 Mrs. H. F. Lewis, Jr.
 Mrs. W. B. Limerick, Jr.
 Mrs. Harry H. Lobdell
 Mrs. Mabel Looney
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